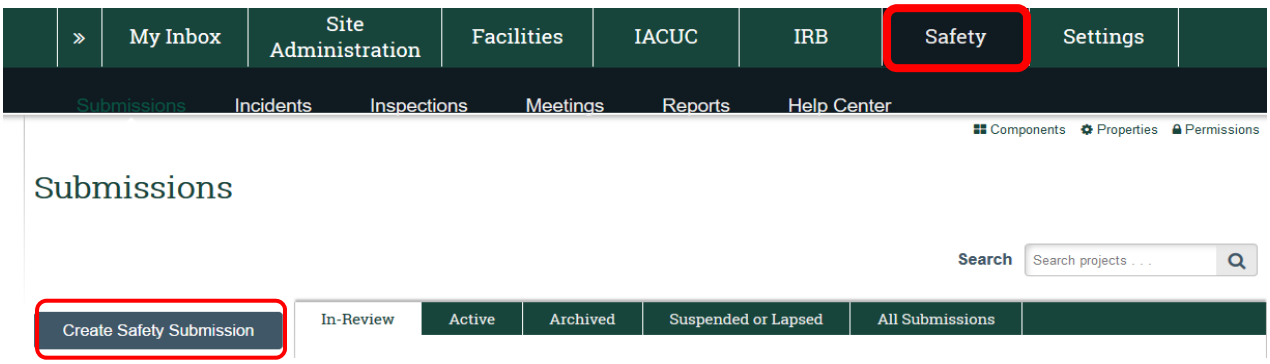
Biosafety Submission Creation

This Quick Guide provides instructions for creating a new Biosafety submission.

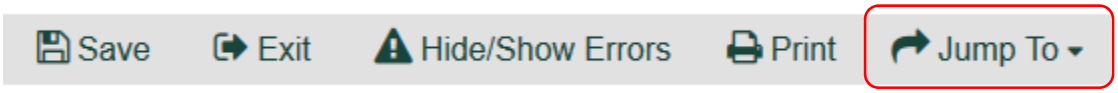
Log into Click with your username and password; your My Inbox will display.

Select **Safety** and then select **Create Safety Submission**.

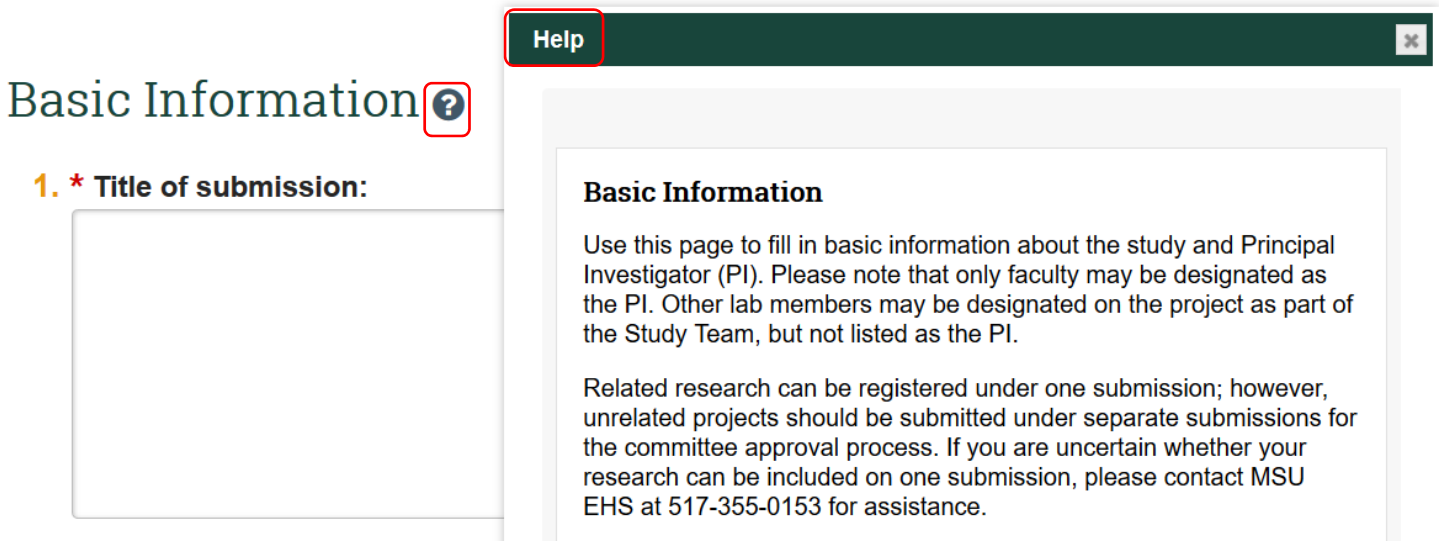


You will be presented with a series of SmartForm pages (page display based upon selections made). Provide a response to each required question within each page of the form; click the Continue button when you are ready to proceed to the next page. **Note:** A response is required for all questions marked with an asterisk (*).

To navigate between the multiple pages, the Jump To drop down menu can be used when working within a submission. This menu will populate based upon the responses provided to the various questions.



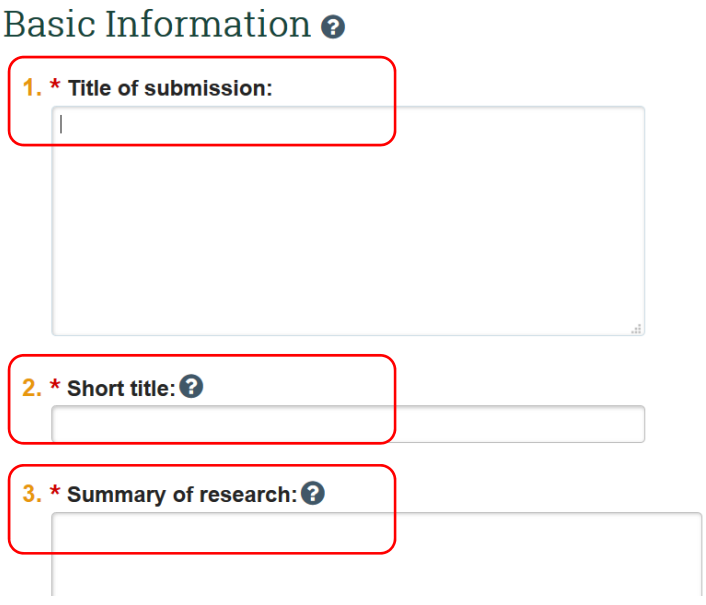
Note: some questions have an associated question mark; click on the question mark to view more information about that question or form.



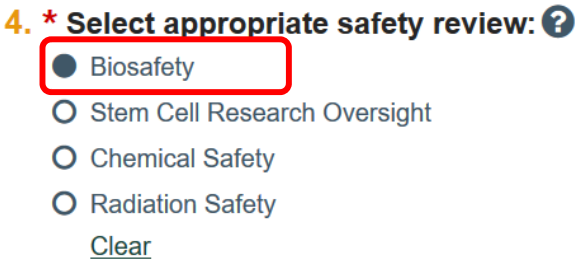
Basic Information:

The purpose of this page is to collect basic information. Provide a response to each of the questions.

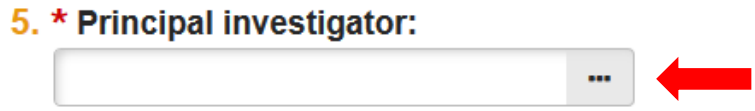
- Questions 1-3: require text to be entered.



- Question 4: requires item selection. Select **Biosafety**.



- Question 5: search for or begin typing last name and select the **Principal Investigator**.

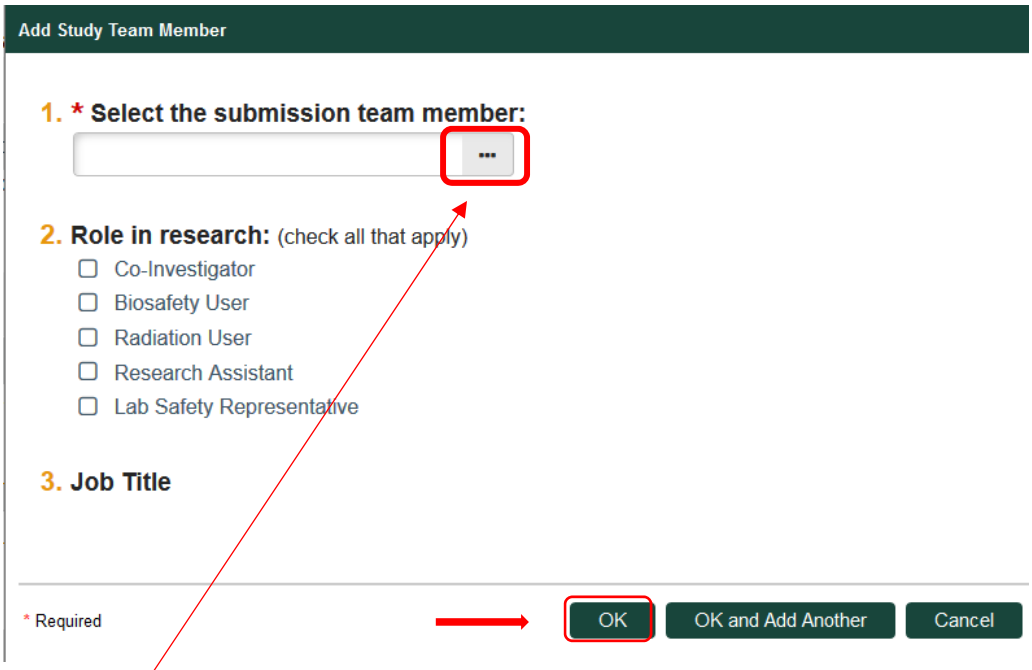


Team Members:

This page defines the submission team members.

- Question 1: select **Add** to add a team member.

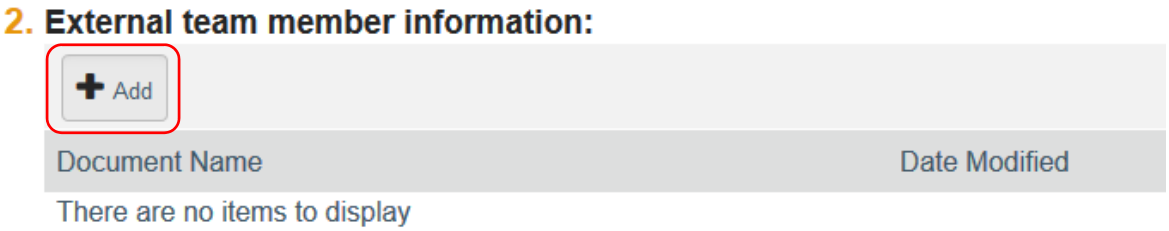
A pop-up window will appear, begin typing or use the search to select the team member, optionally assign their research role, and click **OK**.



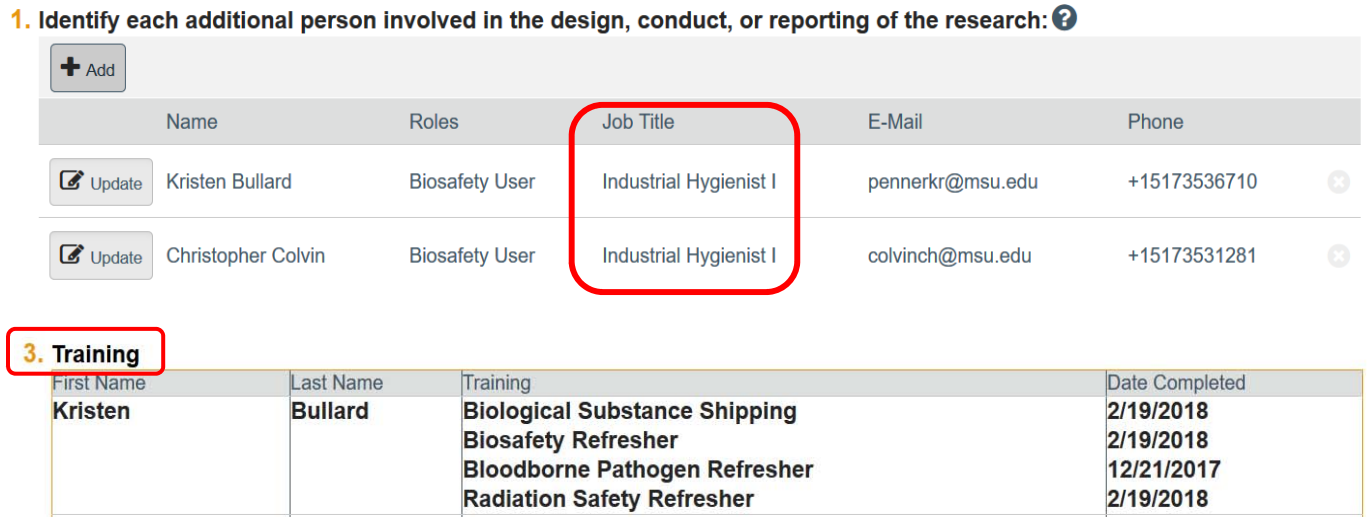
Note: the system will automatically pre-populate the Primary Job Title of the selected team member.

Note – Person Search: If you are having difficulty searching for and finding a team member, it may be necessary for that individual to first log into Click in order to populate their profile in Click. [Please contact EHS (517-355-0153) or the Click Help Desk (clickhelpdesk@msu.edu / 517-355-2000) for further assistance.]

- Question 2: If External (e.g., non-MSU researchers) team members, select the **Add** button. Attach files for each External team member. Form to add external member: https://ehs.msu.edu/_assets/docs/bio/external-team-members_safety.docx



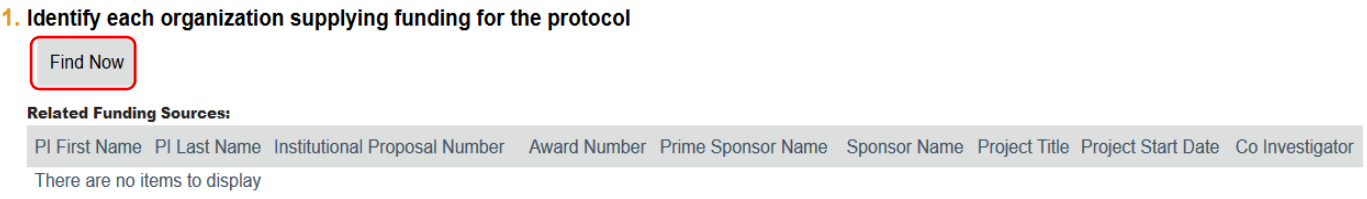
- Question 3: The system will display the training information for each team member added, including the Principal Investigator.



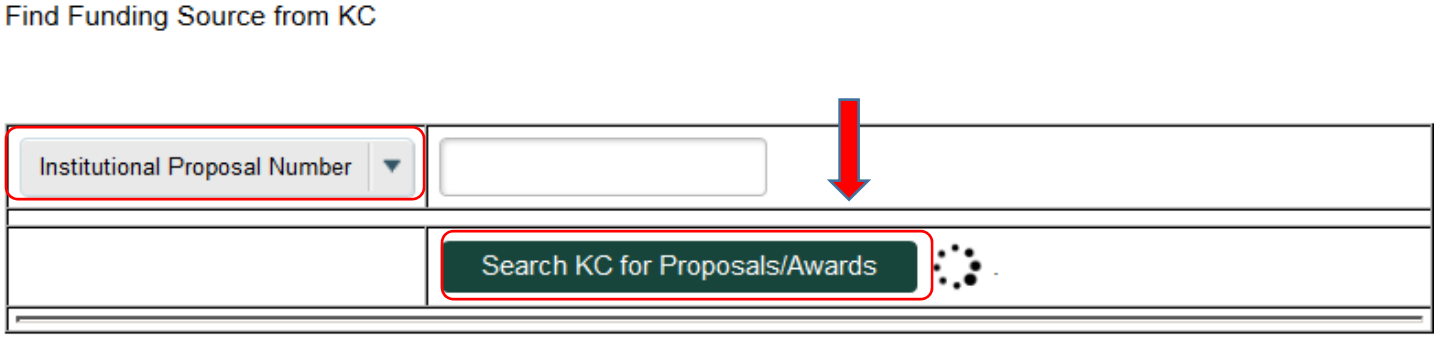
Funding Sources:

Funding source(s) are identified on this page.

- Question 1: select **Find Now** to select a funding source.



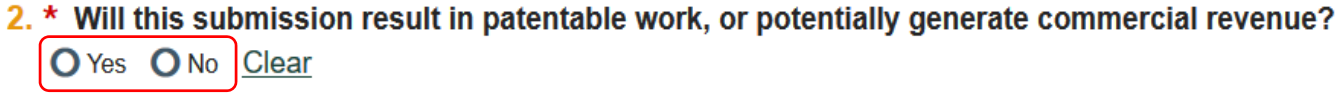
A pop-up window will appear; use the dropdown menu to search for and select the funding source. Select **Search KC for Proposals/Awards**.



Select the funding source (radio button selection) and click **OK**. If more than one funding source applies, repeat the search and selection process.

- Question 2: select **Add**.

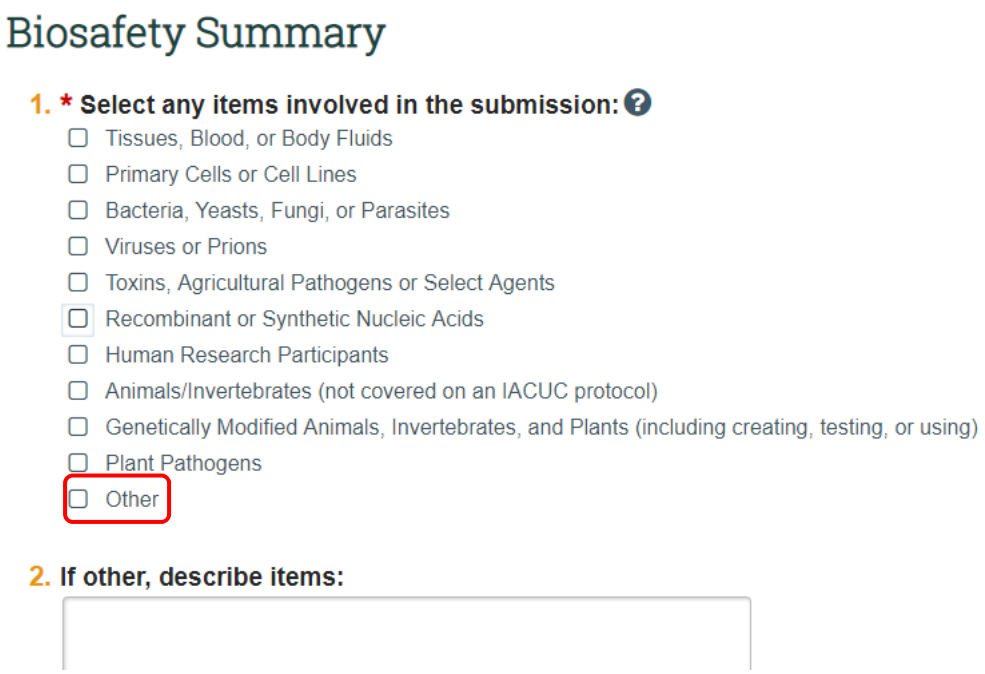
- Question 2: select either the Yes or No radio button.



Biosafety Summary:

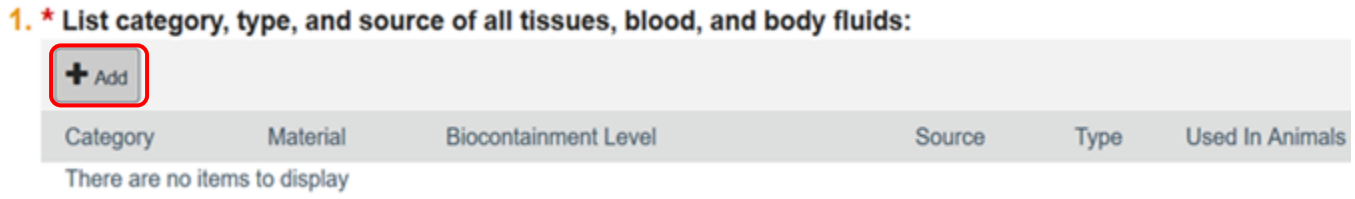
- Question 1: item selection displays additional SmartForm pages. (Example: selecting Tissues, Blood, or Body Fluids displays the Tissues, Blood, or Body Fluids and Biohazards SmartForm pages.)

  Selecting Plant Pathogens displays the Transgenic Plants SmartForm page. If 'Other' is selected, a response (data entry) is required in Question 2.



Tissues, Blood, or Body Fluids:

- Question 1: select **Add**.



- Question 2: describe any tissues transplanted between species.

- Question 3: Describe the quantity of tissues and volumes of fluids to be used.

Selecting the Add button displays the following pop-up SmartForm page:

Add Biological Material Information

1. **Category:**

2. * **Material:**

3. * **Biocontainment level:**
   - BSL-1
   - BSL-2
   - BSL-2+
   - BSL-3

   Clear

4. * **Describe the use of the material:**

5. * **Where are you obtaining the material from?**

6. * **Usage Room Location:**

   Usage Building Location:

7. **If storage location is different than usage location, check here**

8. **Quantity:**

9. **Handlers:**

   There are no items to display

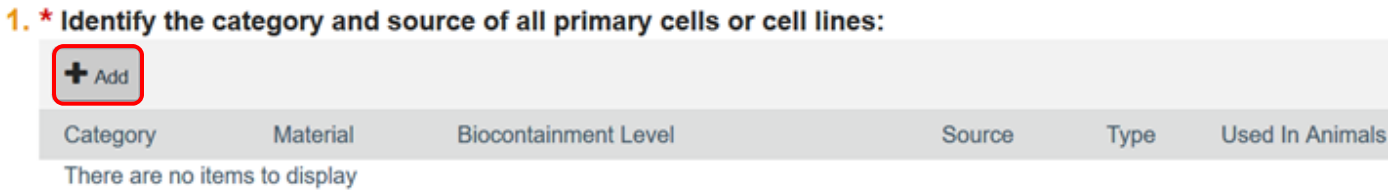
10. * **Is material used in animals?**
    Yes No Clear

11. * **Is material used in humans?**
    Yes No Clear

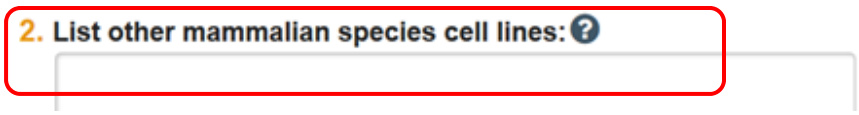
12. * **Is material recombinant or synthetic?**
    Yes No Clear

Human Primary Cells or Cell Lines:

- Question 1: select **Add**.



- Question 2: list other mammalian species cell lines.



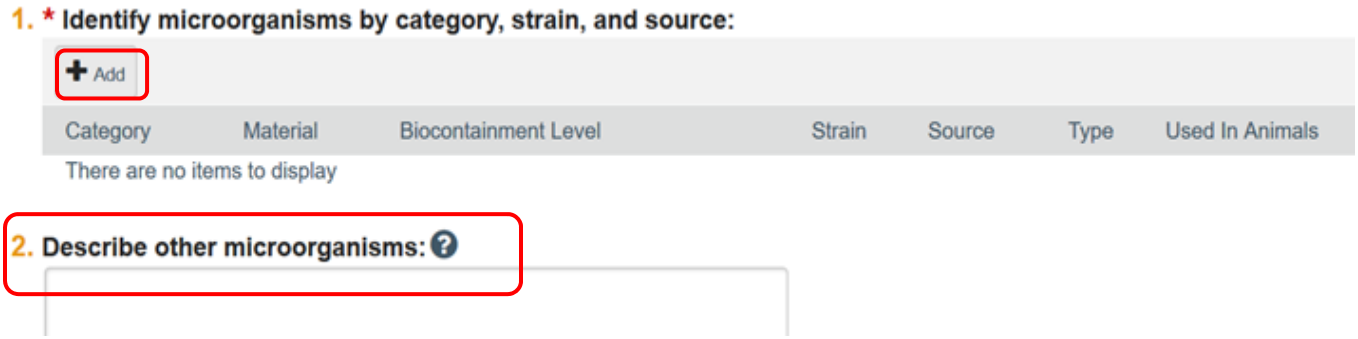
- Question 3: list other non-mammalian species cell lines.

- Question 4: identify cultures in volumes over 10 liters.

Selecting the Add button displays the 'Add Biological Material Information' pop-up SmartForm page (as previously displayed):

Bacteria, Yeasts, Fungi, or Parasites:

- Question 1: select **Add**.
- Question 2: describe other microorganisms.



Selecting the Add button displays the 'Add Biological Material Information' pop-up SmartForm page (as previously displayed):

Add Biological Material Information

Viruses or Prions:

- Question 1: select **Add**.
- Question 2: describe other viruses or prions.

Clicking the Add button displays the 'Add Biological Material Information' pop-up SmartForm page (as previously displayed):

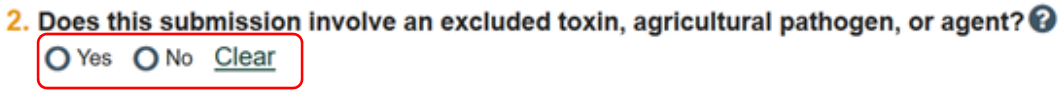
Add Biological Material Information

Toxins, Agricultural Pathogens, or Select Agents:

Note: clicking the link below titled “Select Agents and Toxins Exclusions” directs the user to the (CDC/USDA) Federal Select Agent Program website.

- Question 1: select Add.

- Question 2: select appropriate radio button.



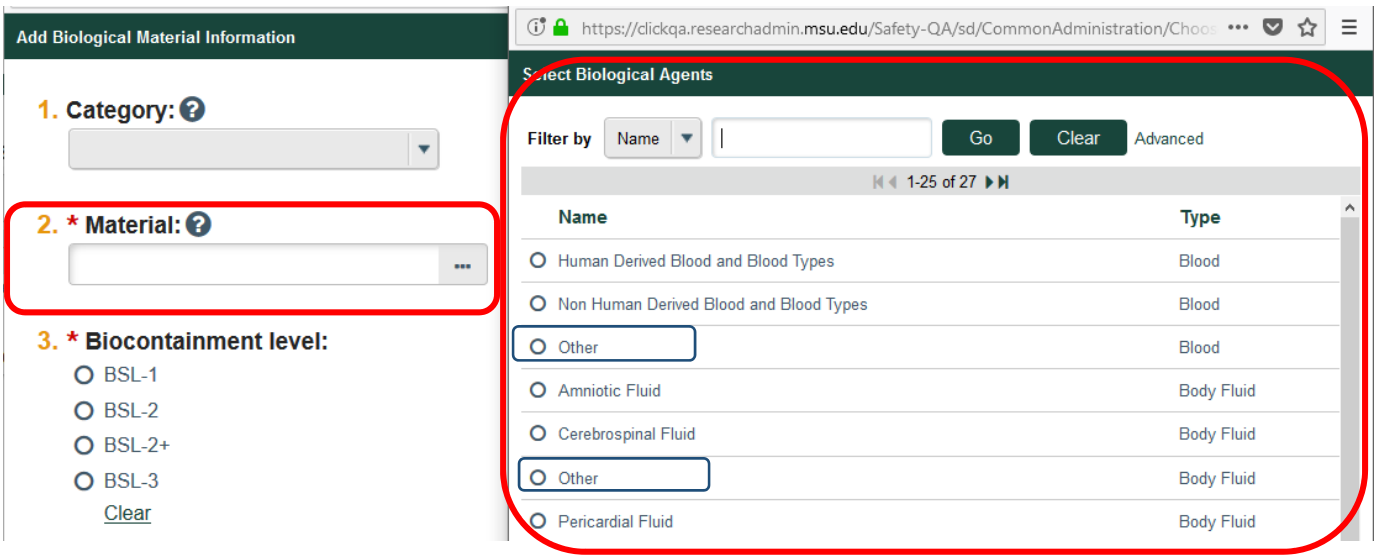
- Question 3: add and upload SOPs.

Clicking the Add button displays the ‘Add Biological Material Information’ pop-up SmartForm page (as previously displayed):

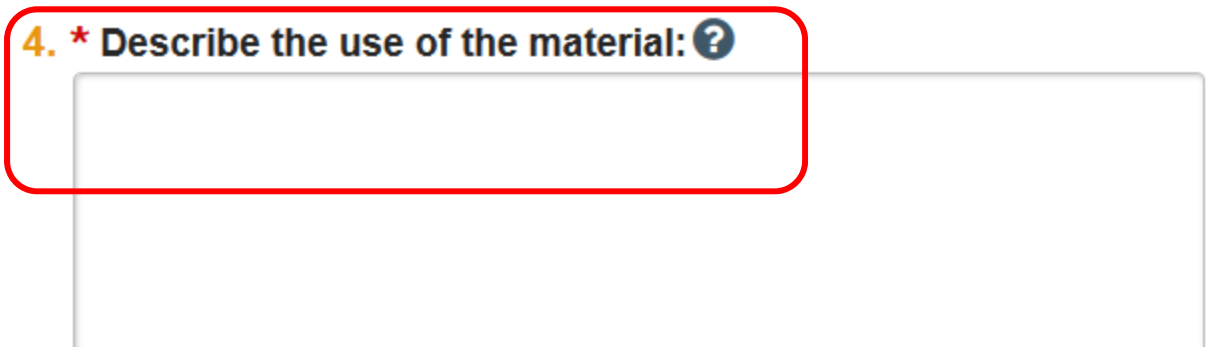
Add Biological Material Information

Add Biological Material Information – Material Selection:

Note: when searching for biological material, if the item is not found in the displayed list, select **Other**.



Identify the material; provide a detailed summary describing the use of the material.



The ‘other’ material will be added to the biological agents list in a future update (as a selection item).

Biohazards:

In a tabular format, the system displays the items selected in the previous SmartForm pages.

Biohazards

1. Summary of each material, agent, toxin, or microorganism that will be used in this protocol:

Agent	BSL	Type	Select Agent	Storage Building	Storage Room	Usage Building	Usage Room	Supplier	Qty.	Handlers	ECX	Recombinant	Used in Animals	Used in Humans
Actinobacillus ureae	BSL-1	Bacteria	no	1855 PLACE-BUILDING 1801	1010-WS18	1855 PLACE-BUILDING 1801	1010-WS18			a	no	no	no	no
Saliva	BSL-1	Body Fluid	no	FEE HALL	317B	FEE HALL	317B				no	no	no	no
42-MG-BA	BSL-1	Cell Line	no	1855 PLACE-BUILDING 1801	1010-WS13	1855 PLACE-BUILDING 1801	1010-WS13				no	no	no	no
Adenovirus type 1	BSL-1	Virus	no	1855 PLACE-BUILDING 1801	1010-WS12	1855 PLACE-BUILDING 1801	1010-WS12				no	no	no	no
African Swine Fever	BSL-1	Virus	yes	1855 PLACE-BUILDING 1801	1010	1855 PLACE-BUILDING 1801	1010			a	no	no	no	no

2. Provide additional details on any materials, agents, toxins or microorganism indicated above:

Recombinant or Synthetic Nucleic Acids Usage:

Recombinant or Synthetic Nucleic Acids Usage

1. * **Responsibilities as a Principal Investigator** NIH brochure:
The NIH requires that every PI read, understand, and comply with this document when working with Recombinant DNA molecules.
Have you read and understand your responsibilities as a PI, as outlined in Section IV-B-7-a through e of the NIH Guidelines?
○ Yes ○ No

2. * **Does research with recombinant or synthetic nucleic acids involve the use of**: (select all that apply)

☐	Section III-A	Experiments that Require Institutional Biosafety Committee Approval, RAC Review, and NIH Director Approval Before Initiation
☐	Section III-B	Experiments That Require NIH OSP and Institutional Biosafety Committee Approval Before Initiation
☐	Section III-C	Experiments that Require Institutional Biosafety Committee and Institutional Review Board Approvals and RAC Review (if applicable) Before Research Participant Enrollment
☐	Section III-D	Experiments that Require Institutional Biosafety Committee Approval Before Initiation
☐	Section III-E	Experiments that Require Institutional Biosafety Committee Notice Simultaneous with Initiation
☐	Section III-F	Exempt Experiments
☐		A deliberate release of genetically-modified (insertion of recombinant or synthetic nucleic acids) plants or animals into the environment

Breeding of Transgenic Animals

Breeding rodents from one strain (propagation/colony maintenance)	BL1	Exempt (III-F-4)
Breeding rodents from one strain (propagation/colony maintenance)	BL2 or higher	III-D-4-b
Breeding rodents from two strains (generating new strain)	BL1	III-E-3
Breeding rodents from two strains (generating new strain)	BL2 or higher	III-D-4-b
Breeding of transgenic animals other than rodents	BL1	III-D-4
Breeding of transgenic animals other than rodents	BL2 or higher	III-D-4
Breeding of recombinant DNA modified arthropods	BL1	Exempt (III-F-4)
Breeding of recombinant DNA modified arthropods	BL2 or higher	III-D-4-b
Breeding of knockouts (propagation)	BL1	Exempt (III-F-4)
Breeding of knockouts (propagation)	BL2 or higher	III-D-4-b
Breeding of knockouts from two strains (generating new strain)	BL1	III-E-3
Breeding of knockouts from two strains (generating new strain)	BL2 or higher	III-D-4-b

3. **Please describe your research objectives including (if question is not applicable to your research, please write N/A):**

a. List how and why the recombinant gene inserts are to be used. Please mark all inserts with an asterisk that may pose a specific hazard or risk. Describe the potential hazards (i.e. oncogenes, inhibitory rNA molecules and off target effects):

b. List how and why the host/vector systems to be used in the research (e.g., bacterial expression plasmid closed in lab strains of E.coli, mammalian expression plasmid transfected into cell culture, replication-deficient adenovirus infecting mouse neurons):

Recombinant or Synthetic Nucleic Acids Usage: (continued)

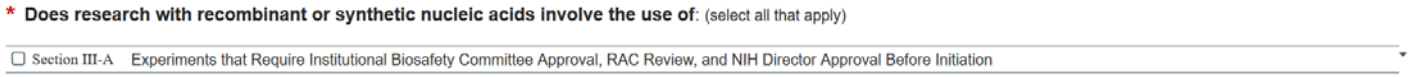
c. Will the research involve the use of antibiotic selection markers?
O Yes O No

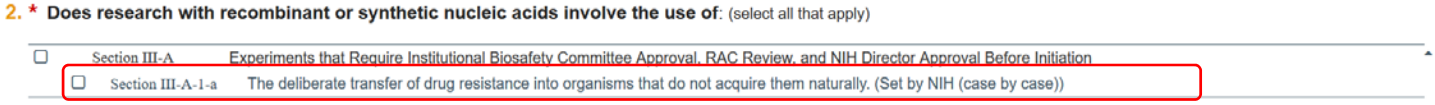
d. Will the research involve the use of plants or animals?
O Yes O No

e. Describe in detail each viral vector to be used. Describe features of the viral vector, if any, that are intended to reduce the likelihood of a recombination event that would lead to a replication-competent vector (e.g., gene deletions, expression of packaging genes on multiple plasmids, self-inactivating long terminal repeats):

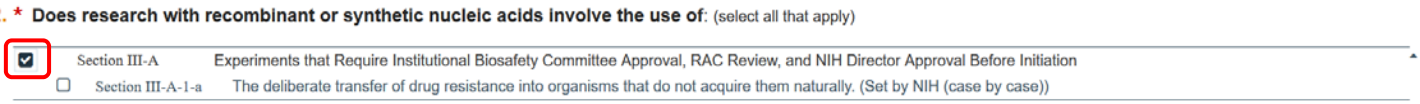
f. Describe the risks that would be associated with accidental human exposure to the viral vector, including the probability and consequences of (1) recombination events leading to restoration of a replication-competent virus, (2) expression of the gene insert product, and (3) integration of the viral vector into the host genome leading to insertional mutagenesis:

Note: (Question 2) clicking the down arrow will display additional information.





Clicking the associated checkbox will also display the additional information:



Recombinant or Synthetic Nucleic Acid Work Description:

1. * **Select source(s) of recombinant system(s):**
   - ☐ Purchasing or obtaining a recombinant construct from another source
   - ☐ Building a recombinant construct

   If you are purchasing and building, please select both checkboxes.

2. * **Recipient Organism – specify the type; include species, strain, cell line, or cultivar receiving the nucleic acid.**

3. * **Will you express a toxin or oncogene?**
   ○ Yes ○ No Clear

4. * **Will the vector host range be altered?**
   ○ Yes ○ No Clear

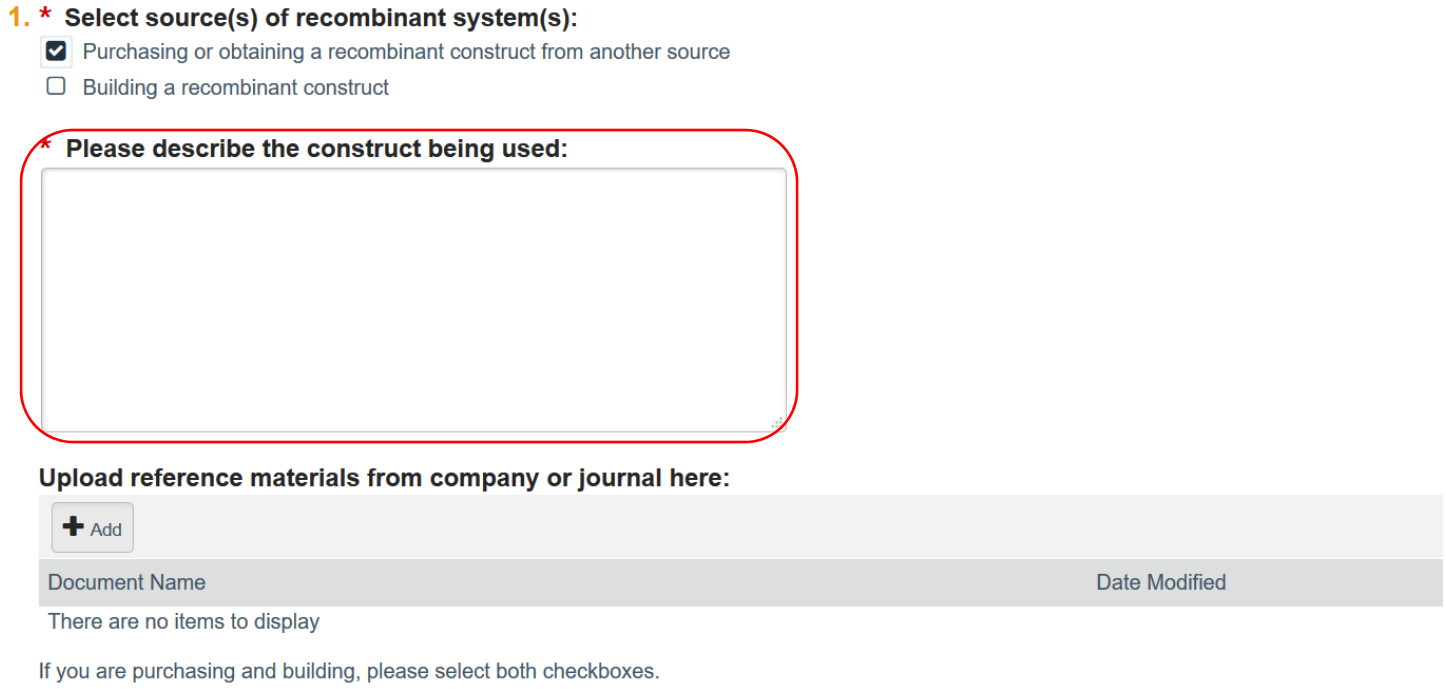
5. * **Will the project use infectious DNA/RNA viruses, defective DNA/RNA viruses, or phages in the presence of helper virus in a tissue culture system?**
   ○ Yes ○ No Clear

6. * **Are human or animal pathogens to be used as a host-vector system?**
   ○ Yes ○ No Clear

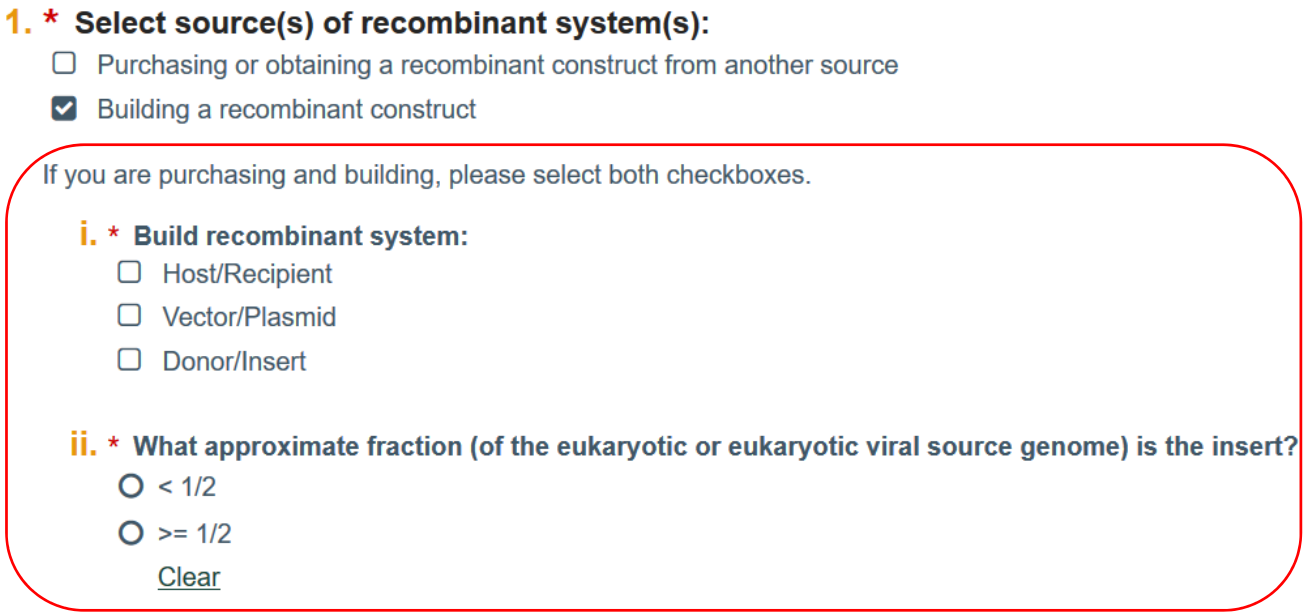
7. * **Are you using CRISPR or other new technologies not efficiently described in previous questions?**
   ○ Yes ○ No Clear

8. * **Deliberate release of recombinant DNA-modified plants, animals, or other organisms into the environment?**
   ○ Yes ○ No Clear

Question 1: when selecting first check box, the system displays field to describe the construct being used.



Question 1: when selecting the second check box, the system displays the following:



Both checkboxes may be selected.

Human Gene Transfer/Human Clinical Trial: Approval:

- Question 1: select Add to attach documents relevant to standard operating procedures.
- Question 2: select upload.

Animals and Arthropods:

1. For research not covered on an IACUC protocol:

i. Identify the species to be used:

Common Name	Scientific Name	USDA Species
Invertebrates	n/a	no

ii. Identify the locations where animals are being housed or used:

Building	Room	Date of Last Inspection	Next Inspection Deadline	Date of Scheduled Inspection

3. Which of the following present exposure risks to the protocol team members or animal care personnel?

- ☐ Aerosols
- ☐ Animal bite/scratch
- ☐ Bedding
- ☐ Blood
- ☐ Contact with lesions on the animal
- ☐ Feces
- ☐ Mucous membrane contact with secretions or excretions
- ☐ Penetrating injury from contaminated caging
- ☐ Saliva
- ☐ Urine
- ☐ Other

Note: (Question 1i) Clicking the ellipsis allows for species selection:

Select One or More Species

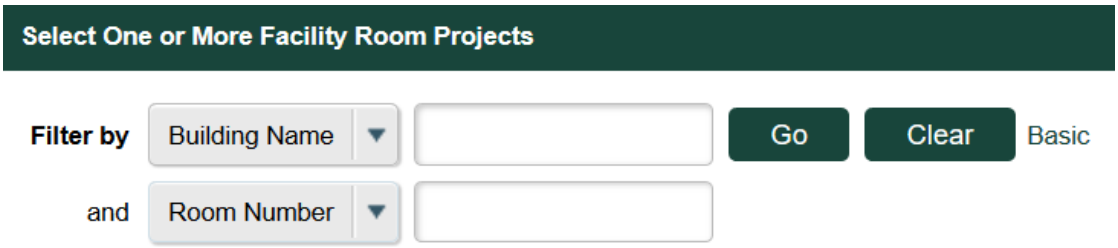
Filter by Common Name Go Clear Advanced

Deselect All

1-25 of 42

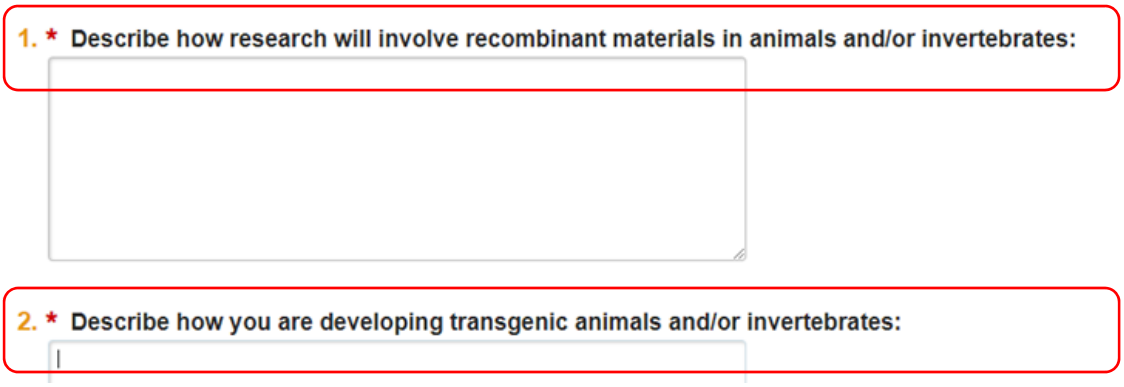
Common Name	Scientific Name	USDA-Covered Species
☐ Axolotl	Ambystoma mexicanum	no
☐ Anole	Anolis	no
☐ Frog	Anura	no
☐ Arthropods	Arthropoda	no
☐ Rat, Grass	Arvicanthis niloticus	yes

Note: (Question 1ii) Clicking the ellipsis allows for building/room selection, switching to advanced search to locate buildings and rooms.

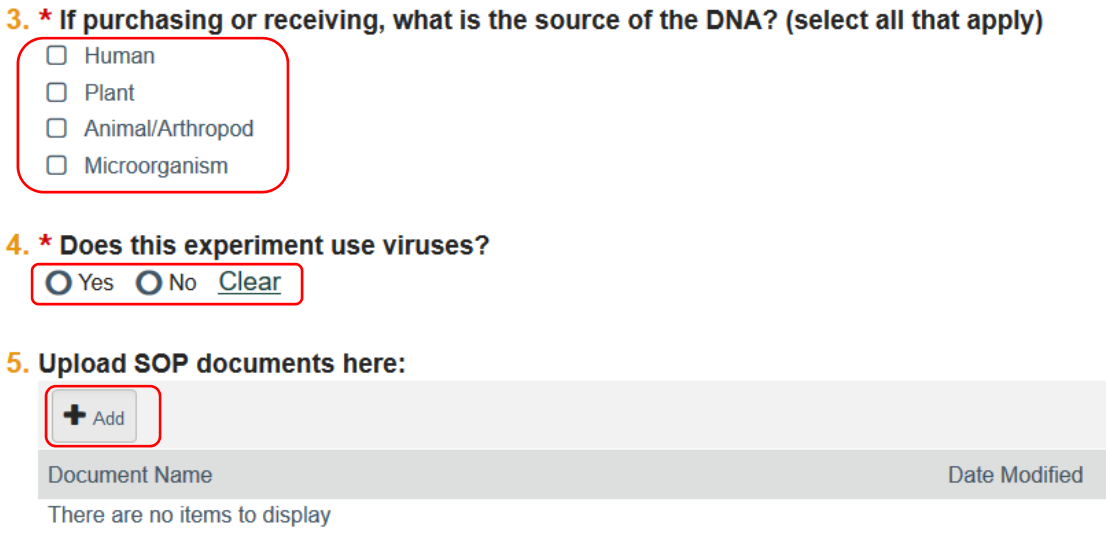


Genetically Modified Animals, Arthropods, and Plants:

- Questions 1 – 2: enter text descriptions.



- Questions 3–4: select appropriate radio button.
- Question 5: upload SOP documents, if applicable.



Gene Transfer: Transgenic Strain:

Questions 1 – 3: enter descriptions and select appropriate radio button.

1. **Describe why it is necessary to generate transgenics to conduct this research:**

2. **Does this protocol involve the alteration of the germ line of the animal or arthropod?**
   ○ Yes ○ No Clear

3. **How will the DNA be introduced?**

Gene Transfer: Virus:

Question 1: select appropriate radio buttons.

Commercially Purchased Animals/Invertebrates

1. * **Are you using commercially purchased (non-MSU) animals or invertebrates?** ● Yes ○ No Clear

   a. * Do the experiments involve formation of rDNA molecules containing >= 1/2 of the genome of any eukaryotic viruses of the same family?
   ○ Yes ○ No Clear

   b. * Do the experiments involve the use of infectious human, animal, or invertebrate viruses?
   ○ Yes ○ No Clear

   c. * Do the experiments involve the use of a defective human, animal, or invertebrate virus in the presence of a helper virus?
   ○ Yes ○ No Clear

Transgenic Plants:

1. * **Does your protocol involve the use of transgenic plants?**
   - ○ Yes ○ No Clear

Risk Group and Containment Practices:

1. * **What is the highest risk group level of the biological agents and materials you will use in the proposed research?** (If you are unsure about the risk group designation of an agent and/or material please refer to the NIH Guidelines Appendix B.)
   - ○ RG-1
   - ○ RG-2
   - ○ RG-3
   - ○ RG-4
   - Clear
2. * **What are the highest biosafety containment practices required for the research activities covered by this protocol?** (If you are unsure about the required containment practices for your research activities refer to the BMBL or NIH links in each category below.)

BMBL:

Biological Research Standards	Biological Research Involving Animals	Biological Research Involving Arthropods
○ BSL-1	○ ABSL-1	○ ACL-1
○ BSL-2	○ ABSL-2	○ ACL-2
○ BSL-2+	○ ABSL-2+	○ ACL-3
○ BSL-3	○ ABSL-3	Clear
Clear	Clear	

NIH Guidelines ***rDNA* or synthetic nucleic acids:**

- Appendix B **- Lab Biosafety Levels**
- Appendix Q **- Animal Biosafety Levels**
- Appendix P **- Plant Biosafety Levels**
- Appendix K **- Large-scale Biosafety Levels**

Physical Containment	Research Involving Animals	Research Involving Plants	Large-scale Uses of Organisms
○ BL-1	○ BL1-N	○ BL1-P	○ BL1-LG
○ BL-2	○ BL2-N	○ BL2-P	○ BL2-LG
○ BL-3	○ BL3-N	○ BL3-P	○ BL3-LG
Clear	Clear	Clear	Clear

Exposure Assessment and Protective Equipment:

Questions 1 – 2: enter description and select appropriate radio button.

1. * **Describe consequences of exposure or release of agents used to humans, animals, plants, and the environment:**

2. * **Indicate the personal protective equipment that will be used:**

- [ ] Lab Coats
- [ ] Eye Protection
- [ ] Gloves
- [ ] Gowns
- [ ] Tyvek Gowns
- [ ] Shoe Covers
- [ ] Respirators
- [ ] Other

Note: (Question 3) selecting Biosafety Cabinet, Autoclave, Eye wash facilities, and Other displays additional data fields. Example:

3. * **Indicate the engineering controls that will be used:**
   - [x] Biosafety Cabinet
   - [x] Autoclave
   - [ ] Centrifuge with aerosol containment (including sealed safety cups, safety buckets, or sealed rotors)
   - [ ] HEPA inline filter for vacuum line
   - [ ] Safety shielding
   - [ ] Hand wash facilities
   - [x] Eye wash facilities
   - [x] Other
   - [ ] N/A

* **If other, specify:**

* **Biosafety cabinet number:**

* **Biosafety cabinet room location:** ...

Biosafety cabinet building location:

* **Biosafety cabinet certification date (month and year):**

* **Autoclave number:**

* **Autoclave room location:** ...

Autoclave building location:

* **Eyewash flush date:**

4. * **Indicate the sharps that will be used:**
   - [ ] Needles with safety feature
   - [ ] Needles without safety feature
   - [ ] Plastic Pasteur pipettes
   - [ ] Glass Pasteur pipettes
   - [ ] Scalpels with safety blade
   - [ ] Scalpels without safety blade
   - [ ] IV tubing with needle
   - [ ] Hamilton syringes
   - [ ] Razor blades
   - [ ] Other
   - [ ] N/A

Exposure Assessment and Protective Equipment: (continued)

5. * **List disinfectants, concentration, and contact time:**

Disinfectant	Concentration	Contact Time
There are no items to display		

+ Add

Note: (Question 5) clicking the 'Add' button displays the following:

5. * **List disinfectants, concentration, and contact time:**

Disinfectant	Concentration	Contact Time	
			✖

+ Add

6. * **Provide any vaccination recommendations or other medical advice that should be observed for personnel involved in this research:**

- ☐ Hepatitis B
- ☐ Influenza
- ☐ Rabies
- ☐ Other
- ☐ N/A

Dual Use Research of Concern:

Dual Use Research of Concern (DURC) is life science research that, based on current understanding, can be reasonably anticipated to provide knowledge, information, products, or technologies that could be directly misapplied to pose a significant threat with broad potential consequences to public health and safety, agricultural crops and other plants, animals, the environment, materiel or national security. For a full discussion of this topic, consult the NSABB website.

1. * **Is your research reasonably anticipated to fall under DURC based on current understanding?**
   ○ Yes ○ No Clear

Note: selecting 'Yes' displays the following:

1. * **Is your research reasonably anticipated to fall under DURC based on current understanding?**
   ● Yes ○ No Clear

- Enhances the harmful consequences of the agent or toxin
- Disrupts immunity or the effectiveness of an immunization against the agent or toxin without clinical or agricultural justification
- Confers to the agent or toxin resistance to clinically or agriculturally useful prophylactic or therapeutic interventions, or facilitates the agent or toxin's ability to evade detection methodologies
- Increases the stability, transmissibility, or the ability to disseminate the agent or toxin
- Alters the host range or tropism of the agent or toxin
- Enhances the susceptibility of a host population to the agent or toxin
- Generates or reconstitutes an eradicated or extinct agent or toxin

a. * Comment on aspects of your research with potential for dual use:

Environmental Release Controls:

Questions 1 – 3: select appropriate radio buttons.

1. * How will biohazardous waste be managed for disposal?

	Waste Type	Disposal Method
☐	Solid	Autoclaved
☐	Solid	Picked up by EHS
☐	Solid	Other
☐	Liquid	Autoclaved prior to sewer
☐	Liquid	Chemical treatment prior to sewer
☐	Liquid	Picked up by EHS
☐	Liquid	Other
☐	Sharps	Sharps container - Red
☐	Sharps	Pharmaceutical sharps - Black
☐	Sharps	Chemotherapeutic (antineoplastic) sharps - Yellow
☐	Sharps	Other
☐	Tissue	Stored in refrigerator or freezer until picked up by EHS
☐	Tissue	Other
☐	Blood	Tubes are emptied and collected in separate waste container with appropriate label; then picked up by EHS
☐	Blood	Other
☐	N/A	N/A

Questions 1 – 3: select appropriate radio buttons.

2. * Do you agree to the following? ○ Yes ○ No Clear

- to follow the biological material spill response procedure outlined during training and as specified on the procedure card within the biological spill kit, and
- to make sure all personnel are aware of the procedure and expected to adhere to it?

3. * Do you have a spill kit? ○ Yes ○ No Clear

Biosafety Additional Information:

Questions 1 – 3: select appropriate radio buttons.

1. * **Does this research involve shipment or receipt of materials that require an import or interstate transport permit (i.e. CDC import permit, USDA APHIS import permit, USDA APHIS interstate transport permit)?**
   ○ Yes ○ No Clear

   For self-transport of regulated or hazardous biological materials between MSU labs, facilities or non-MSU facilities, please use the Packaging, Containment, Absorbent and Labeling (PCAL) system. https://ehs.msu.edu/lab-clinic/shipping/pcal.html

2. * **Will you be transporting biological materials or genetically modified materials between lab and other MSU facilities?**
   ○ Yes ○ No Clear

3. * **Will you be transporting biological materials or genetically modified materials between MSU and non-MSU facilities?**
   ○ Yes ○ No Clear

4. * **Does this research involve human subjects?**
   ○ Yes ○ No Clear

5. * **Does this research involve the use of live vertebrate animals?**
   ○ Yes ○ No Clear

6. * **Will this project require a field release registration?**
   ○ Yes ○ No Clear

7. * **How will exposure incidents be managed by research personnel?**
   - ○ I agree to follow the exposure incident response procedures located in the MSU Biosafety Manual and the MSU Exposure Control Plan. All personnel will be made aware of the procedure and be expected to adhere to it as it related to this project.
   - ○ This research is being conducted at Grand Rapids Research Complex (GRRC). I agree to follow MSU exposure incident response procedures located in the MSU Biosafety Manual and the MSU Exposure Control Plan and report to security.
   - ○ This research is not being conducted at any MSU facility.
   - ○ Additional exposure response procedures will be used due to the nature of the proposed research (i.e. BSL-3).

   Clear

Note: Question 1 ‘Yes’ radio button selection – page display:

1. * **Does this research involve shipment or receipt of materials that require an import or interstate transport permit (i.e. CDC import permit, USDA APHIS import permit, USDA APHIS interstate transport permit)?**
   ● Yes ○ No Clear

   a. * **Additionally, all materials must be shipped according to International Air Transportation Authority (IATA) regulations. For shipment of any recombinant DNA materials, you must contact the Biosafety Team at EHS for permit and shipping assistance. Provide the permitting agency and permit number:**

Biosafety Additional Information:

Note: Questions 3-6 'Yes' radio button selection – page display:

3. * **Will you be transporting biological materials or genetically modified materials between MSU and non-MSU facilities?**
   ● **Yes** ○ **No** Clear

   a. * **If yes, who will ship the material, trained personnel is required?**
   - ○ University Logistics
   - ○ Trained personnel in department or lab and provide lookup to person directory
   - ○ Other

   Clear

4. * **Does this research involve human subjects?**
   ● **Yes** ○ **No** Clear

   a. **Related IRB Protocol(s):**

   + Add

Study ID	Title	PI	Status	Coordinator	Last Date of Approval
There are no items to display					

5. * **Does this research involve the use of live vertebrate animals?**
   ● **Yes** ○ **No** Clear

   a. **Related IACUC Protocol(s):**

   + Add

Protocol ID	Title	PI	Status	Coordinator	Species	Last Day of Triennial Approval Period
There are no items to display						

6. * **Will this project require a field release registration?**
   ● **Yes** ○ **No** Clear

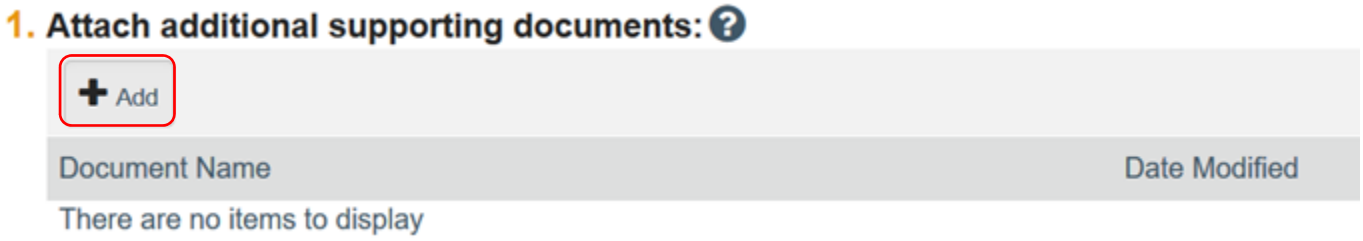
   a. * **If yes, upload permit:**

   + Add

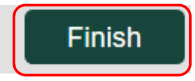
Document Name	Date Modified
There are no items to display	

Supporting Documents:

Question 1: click the **Add** button to attach or upload documents relevant to the submission (e.g., waste, spill, and/or decontamination management plans, SOPs – documents that will aid in the review of the submission).



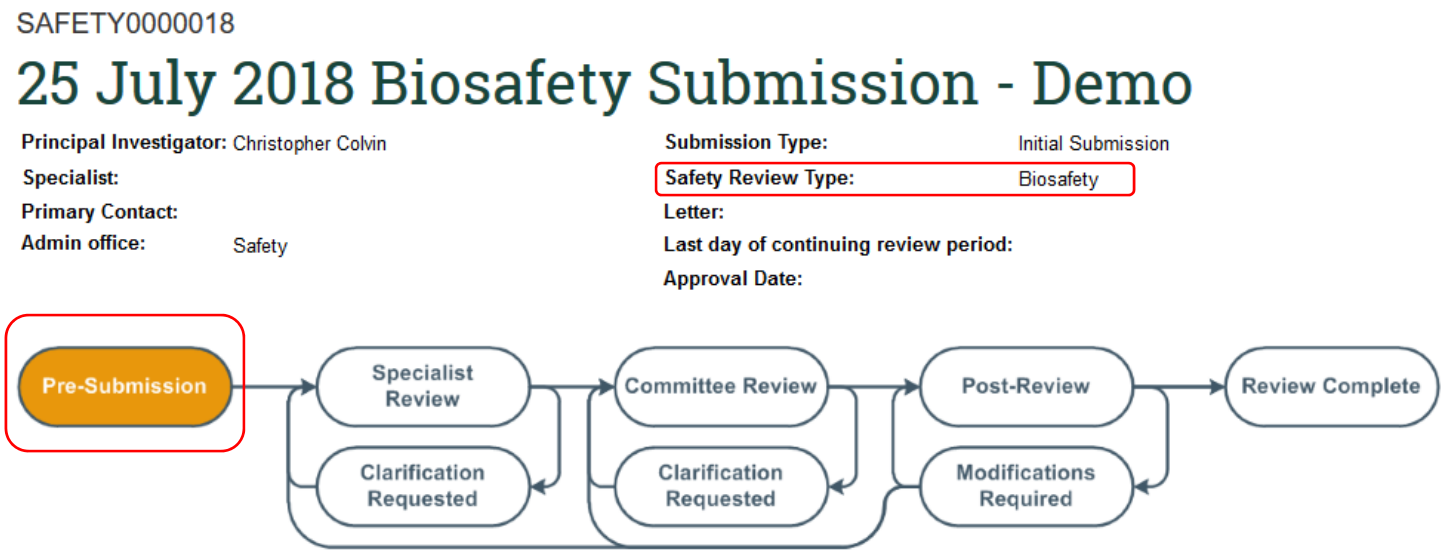
Click the **Finish** button.



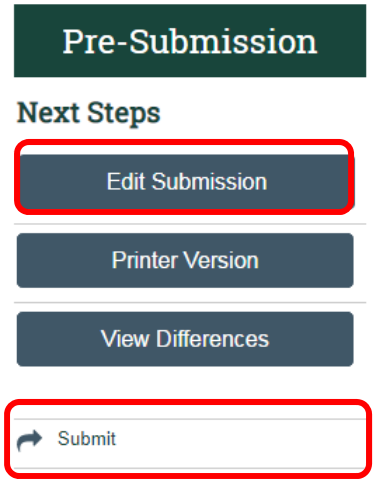
Note:

- Selecting Finish will not submit the application; the Submit action on the application workspace still needs to be performed.
- Selecting Finish will exit the SmartForm and return you to the application workspace.
- You can also select Exit to exit the SmartForm and return to the application workspace.

Submission Workspace:



The submission may still be edited by the Principal Investigator/applicant or select 'Submit' on the left side menu (application workspace).



Note:

- The **Submit** action will display on the application workspace only to the PI.
- The **Submit** action is not displayed to team members on the application workspace.

Review the Investigator's Assurance.

Submit

Investigator's Assurance

Biosafety:

- I attest that the information contained in the Huron Click submission is accurate and complete.
- I agree to comply with the requirements pertaining to the possession, use, transfer and disposal of all regulated biohazardous materials in accordance with all applicable Federal, State and local regulations as well as MSU policies and procedures.
- I attest that prior to the onset of research described in this submission, all persons involved shall have site specific safety training that covers the use and disposal of all research materials.
- For my laboratory and any other research locations owned by MSU that I conduct research in, I hereby adopt the MSU EHS Safety Manuals (Biosafety, Bloodborne Exposure Control Plan, Chemical Hygiene, MSU Hazardous waste, MSU Biohazardous Waste, etc.) as the principal safety reference material ***in combination with site specific safety operating procedures that must be developed by me for the research*** conducted by myself, lab members and visitors. In addition, for locations not owned by MSU, I will follow the protocols provided by the leased or borrowed space as long as they are not in conflict with MSU policies and procedures.
- Due to Federal, State and Local reporting requirements, I will report any theft, loss, release or exposure to any biological research materials ***immediately*** to the MSU Biosafety Officer at (517) 355-0153. After hours and weekends, will go to the EHS Pager who will contact the Biosafety Officer or designate.
- I understand my responsibilities with regards to laboratory safety and security and certify that the submissions as approved by the IBC are good for the time period established (3 years) and that I will submit an annual assurance document as required by the NIH and MSU.

Click the checkbox indicating statement agreement, add applicable comments and supporting documentation, and click the OK button.

If you have finished filling out your application, click "OK". Afterwards you will no longer be able to edit the application. You will receive email when each approval is granted or refused, and again when all the required approvals are received.

*If you are not ready to submit your application, click **Cancel**.*

* **I agree with the above statement:** ☐

1. **Comments:**

2. **Supporting documents:**

Add

Document Name	Date Modified

There are no items to display

OK Cancel

The application has now been submitted to the Biosafety office for review.

SAFETY0000018

Demo - Biosafety Submission

Principal Investigator: Christopher James Colvin
Specialist:
Primary Contact:
Admin office: Safety

Submission Type: Initial Submission
Safety Review Type: Biosafety
Letter:
Last day of continuing review period:
Approval Date:

Note:

- The application is now in the Specialist Review state.
- The application is not editable in the Specialist Review state.