University of Scranton
Institutional Biosafety Committee

Application to use Human Blood, Blood Products, Body Fluids or Tissues in Teaching Laboratory

This application is to provide the Institutional Biosafety Committee (IBC) with the information it needs to review and evaluate laboratory exercise, to ensure that the procedures are consistent with the University Biosafety Policy and to ensure that faculty, staff and students are properly trained to work with and/or are protected from exposure to biohazardous materials in the media of human blood, blood products, body fluids or tissues.

Complete the items in the form below and submit the document to the University of Scranton Institutional Biosafety Committee, c/o Office of Research and Sponsored Programs, IMBM 203.

Faculty member(s) _______________________________ Dept. ____________________________

Course Number and Title _____________________________________________________________
(Attach a course syllabus)

Semesters taught____________________________________________________________________

Laboratory Exercise _______________________________________________________________
(if multiple exercises using human body fluids or tissues, use a separate form for each exercise).

ATTACH A COPY OF THE LABORATORY PROTOCOLS AS USED BY THE STUDENTS, TEACHING ASSISTANTS, OR INSTRUCTORS.

Describe the nature of the exposure, detailing which body fluids will be used:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What type of training and personal protective equipment will students receive prior to handling human blood tissue or fluid?
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Will students be handling only their own blood/tissues/fluids? ____________________________

Describe alternatives to human blood/tissues/fluids (if any) that might be used for this exercise:
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Describe your disinfection/disposal for the human blood/tissues/fluids:
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

ASSURANCES FOR USE OF HUMAN BLOOD, BLOOD PRODUCTS, TISSUES AND BODY FLUIDS

As the principal instructor for this class, I assure that:

1. the information provided on this form accurately summarizes the nature and extent of the proposed use of biohazardous material(s) and the nature of its biological hazards;

2. all individuals (including students) handling the biohazardous agents described in this application are technically competent and will be properly trained in the handling and disposal of these materials;

3. I will include a statement in the syllabus informing those concerned that the experiments are in compliance with the University of Scranton’s Biosafety Policy.

4. I will obtain approval from the IBC before initiating any changes to this application.

Faculty name (Printed/Typed)________________________________________________________

Signature and date ________________________________________________________________