



## Continuing Review Form to Biosafety Protocol

### Instructions

(Failure to follow these instructions may result in delays in processing)

Complete this form for the annual review of your IBC protocol.

#### What if I also want to make changes to the protocol?

The continuing review provides information to the IBC on current status. If you also need to submit changes, submit an amendment form to get approval for the changes.

#### What should I include in the continuing review submission?

- Ensure all study personnel have up-to-date [CITI](#) training.
- Evidence of annual enrollment in occupational health enrollment, if relevant (BSL-2 and above).
- Continuing Review form (this form)
- Amendment form (if any changes are also being requested)

#### By submitting this Continuing Review Form, the research staff attest:

- 1) They have read and reviewed this Continuing Review Form;
- 2) The information submitted is accurate; and
- 3) All requirements pertaining to the use, handling, storage, and disposal of biohazardous materials outlined in the approved IBC registration are being followed.

After completing this form, submit it and all relevant materials to: [ibc@tamuct.edu](mailto:ibc@tamuct.edu).

For questions, email the Chair of the IBC at [ibc@tamuct.edu](mailto:ibc@tamuct.edu) or contact the Office of Research in Founder's Hall, Room 418 or the Executive Director for Research at [murphyw@tamuct.edu](mailto:murphyw@tamuct.edu).



OOOR USE ONLY  
IBC #: Click or tap here to enter text.  
Continuing Review #: Click or tap here to enter text.  
Date received: Click or tap to enter a date.

### Continuing Review Form to Biosafety Protocol

#### IBC Overview

IBC #: Click or tap here to enter text. Maestro # (if funded): Click or tap here to enter text.  
Principal Investigator Name: Click or tap here to enter text.  
Project title: Click or tap here to enter text.

BSL Level:  BSL-1  BSL-2 Animal BSL:  ABSL-1  ABSL-2

#### General Update

- Select the current status for the protocol.
  - Study is still in operation and will be used with **no** revisions.
  - Study is still in operation, but modifications are requested (Submit an Amendment form).
  - Study is complete. Please close the file.
  - Study was never started. Please close the file.
- Any changes to the approved registration that you have NOT already submitted to the IBC?  
*Changes include funding, risks, agents used/stored, research procedures or types of PPE required.*  
 Yes  No If yes, submit an Amendment form.
- Is the biohazardous materials used or stored consistent with those listed in the approved protocol (Part II – Agent Information)?  
 Yes  No If no, submit an Amendment form to add new materials.
- Any reportable incidents during the last year that you have NOT already reported to the IBC?  
 Yes  No If yes, submit a Reportable Event form.  
  
If yes, please explain why this incident was not reported.  
Click or tap here to enter text.
- Date of last lab inspection: Click or tap to enter a date.
- Any findings from the last lab inspection NOT already reported to the IBC?  
 Yes  No If yes, submit the lab inspection report with this continuing review form.

#### Protocol and Personnel

1. Do all personnel have access to the most recent version of the IBC protocol?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are all personnel who handle rDNA, synthetic nucleic acid molecules, biological agents/toxins, or other biohazardous materials listed on the protocol?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Are all personnel current on CITI training?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are all personnel current on Occupational Health Program enrollment, if relevant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have all personnel received and completed training appropriate to their job duties? ( <b>Note: PI is ultimately responsible for ensuring all research personnel and students are trained.</b> )	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Are personnel wearing protective clothing (e.g. gloves, lab coat, etc.) appropriate for the biohazardous or biological materials in use and for subsequent procedures?	<input type="checkbox"/> Yes <input type="checkbox"/> No