IBC Laboratory Incident Report Form

INSTRUCTIONS:

The Principal Investigator (PI) or Teaching Laboratory Coordinator must complete and submit this form to report an incident. This form is required for all laboratory incidents involving hazards— which includes significant spills, hazard exposure, or any incident resulting in physical harm. This form must be submitted within 3 days of the incident to the Institutional Biosafety Committee (ibc@alasu.edu). Review of this form will be followed by an incident investigation, if necessary, and/or a collaborative meeting to address corrective actions to reduce future risk of incidents.

Section A: General Information	
Report Date	
Reporter Information	Name: Telephone #: Position:
Person(s) involved in the incident	Name: Department: Telephone #: Email Address: Position:
Section B: Incident Report	
Date of Incident	
Time of Incident	
Summary of the Incident	
Nature of Incident (Check all that apply) ☐ **Physical Injury** ☐ **Exposure** ☐ **Property Damage** ☐ **Improper Procedure** ☐ **Spill** ☐ **Equipment Malfunction** ☐ **Other:**	
Type of Hazard involved in the incident (Check all that apply) ☐ **Chemical** ☐ **Physical** ☐ **Biological** ☐ **Other:**	
Procedures or activities being performed during the incident	
Description of any personal protective equipment used at the time of the incident	

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Immediate actions taken to mitigate the hazardous consequences (including First Aid)	
Description of the Emergency Services Response	Were emergency services contacted? □ Yes □ No
If yes: Type of services requested (e.g. police, medical, etc.)	
If yes: Name of responding personnel	
If yes: Date and time emergency services were contacted	
If yes: Description of any medical treatment provided or recommended	
Description of Corrective Actions Discussed	
Time Frame for Implementation of Corrective Actions:	
Additional Comments	

Signatures

Reporter _____ Date _____

PI/Teaching Lab Coordinator _____ Date _____

IBC Chair _____ Date _____

Department Head _____ Date _____

Dean of C-STEM _____ Date _____

Procedure for Handling Biosafety Incidents or Violations.

1. Internal Reporting

Internal reporting must occur as soon as a violation or incident is discovered.

a. **Principal Investigator (PI)/Supervisor**: Any lab personnel (including students) who has a biosafety concern or has witnessed a biosafety violation must immediately inform their PI/supervisor. The PI must address the concerns or investigate and address the violation. In that case of a serious biosafety violation, the PI must recommend the violator for Biosafety retraining and forward a copy of the retraining certificate to the Institutional Biosafety Committee.

b. **Anonymous Reporting**
Anyone who witnesses a biosafety violation on the ASU campus can directly notify the institutional Biosafety Committee (IBC, ibc@alasu.edu) in good faith without fear of retaliation.

c. **Institutional Biosafety Committee (IBC)**: Violations that cannot be addressed buy the PI must be reported to the IBC. The IBC will review the violation and determine the severity of the non-compliance.

d. **Institutional Official**: In case of serious harm or recuring trends, the Director of the office of research and sponsored programs (ORSP) will be notified by the IBC.

2. Investigation and Resolution Process

When a violation is reported to the IBC, the following steps will be taken:

a. **Initial investigation:** The IBC Chair will conduct a preliminary review to assess the severity and nature of the non-compliance.

b. **Committee Review**: The full IBC will investigate the event, which may include interviewing personnel and inspecting the laboratory/facility.

c. **Determination**: The IBC will determine if the violation was "serious" or "continuing" and outline the required Corrective Action Plan.

d. **Sanctions**: In case of recuring severe violations, the IBC may suspend or terminate the biosafety approval for the project or advise the University officials to restrict laboratory access until compliance is re-established.

3. External Reporting Requirements

ASU is legally required to report specific types of violations to the NIH Office of Science Policy (OSP).

- **Immediate Reports**: Spills or accidents in BSL-2 labs involving overt exposure must be immediately reported or no later than 72 hours following the accident.
- Immediately call 911 if there is a serious exposure, injury, dangerous fumes, or an uncontrolled spill.
- **30-Day Reports**: Any significant problems, violations of the NIH Guidelines, or research-related accidents/illnesses constitutes a trigger for a mandatory 30-day formal report. These include:

a. Administrative & Regulatory Violations

- ***Lapse in IBC Approval***: Conducting research with biohazard without prior IBC approval.

- ***Unauthorized Changes***: Significant modifications to a research project's risk profile or scope without prior notification and approval from the IBC.
- ***Training Failures***: Failure of the Principal Investigator (PI) to ensure that all laboratory personnel are adequately trained in required biosafety practices and techniques.

b. Containment Breaches

- ***Environmental Release***: Any accidental release of a Risk Group 2 or 3 agent outside of primary containment (e.g., a spill outside of a Biosafety Cabinet).
- ***Equipment Failure***: Malfunctions in critical safety equipment, such as a failed centrifuge or a biosafety cabinet that was not certified annually as required.
- ***Improper Disposal***: Failure to follow prescribed sterilization or disposal procedures for biohazardous waste, including rDNA materials.

c. Animal & Plant Incidents

- ***Transgenic Escapes***: The escape or improper disposition of a transgenic animal (e.g., a mouse) or the unauthorized release of transgenic plants, seeds, or pollen.
- ***Animal Bites/Scratches***: Injuries sustained from research animals that are infected or contain rDNA molecules, which are often classified as overt exposures.

d. Personnel Exposures (Standard & Potential)

- ***Potential Exposure in BSL-2***: A potential exposure in a BSL-2 lab (e.g., a splash to the face that did not result in an infection) must still be documented and reported within 30 days.
- ***Research-Related Illness***: Any illness in lab personnel that can be reasonably linked to the biological agents used in the research.