

STATEMENT OF INFORMED CONSENT
Institutional Biosafety Committee (IBC)
The University of Mississippi Medical Center (UMC)
(Approved September 2004)

FILE THIS FORM WITH THE IBC BEFORE PERSONNEL WORK WITH BIOHAZARDS.

1) I am aware that I will participate in activities that involve potential exposure to the following biohazard(s): _____

2) I have read and understand UMC's Standardized Plans for waste disposal, training and emergency procedures, including the requirement to report exposure incidents to Student and Employee Health.
Yes No

3) I understand this biohazard is either
exempt from federal guidelines but must be worked with at BSL-1 (skip to and complete #8)
or
it is NOT exempt and requires containment at BSL-1 BSL-2 BSL-3 BSL-4 .

4) I am aware that inherent risks associated with this biohazard include: _____

5) I have read sections of guidelines (indicated below) pertinent to the biosafety level(s) checked above.
 CDC (<http://www.cdc.gov/od/ohs/biosfty/bmbl4/bmbl4toc.htm>) and/or
 NIH http://www4.od.nih.gov/oba/rac/guidelines_02/NIH_Gdlnes_Ink_2002z.pdf

6) I have been trained in practices, procedures and the use of barriers that, when properly employed, will provide containment suitable to the Biosafety Level checked above.
Yes

7) I have read and understand UMC's *Guidelines for Activities Involving Recombinant DNA and/or Microbiological Biohazards*.
Yes

8) Print Name _____ Position _____

Signature _____ Date _____

Print Supervisor's Name _____

Supervisor's Signature _____ Date _____

Copy: 1) to IBC, 2) maintained by supervisor and 3) in Biosafety Manual (if BSL-2 or higher).