



The University of Western Ontario
Biohazards Subcommittee Meeting

Minutes of January 13th, 2012
9:30 a.m. – 11:00 a.m., SSB 5104

Present: Dr. J. Millar (Chair), Dr. S. Barr, Dr. G. Dekaban, Dr. S. Koval, Dr. S. Siu, J. Stanley, S. Xhiku (OH&S Intern)

Regrets: Dr. T. deLangley, Dr. I. Welch

1.0 Introductions

None needed.

2.0 Approval of Minutes – December 9th, 2011

Motioned: Dr. S. Barr

Seconded: Dr. S. Koval

3.0 Biological Agents Registry Forms

3.1 Daley, M. (Modification)

Approved: It is recommended that personnel working with human saliva use universal precautions and wipe the outside of the container once it is caught. The saliva should be transported in some break-proof container so that the contents don't spill.

3.2 Thompson, G.

Approved: Wikipedia information should not be accepted. If there are aerosolized spores, they may be an allergy/health issue so Workplace Health will need to be involved. The source is Brock (not Briock) University.

3.3 Lee, T. Y. (Modification)

Approved: The cell line should be listed under the "Approved primary and established cell lines" section. It should be clarified if the cells will be handled by the Dr. Lewis's lab – since this lab may be moving.

3.4 Savory, E.

(Revisit, December 2011)

Approved: The Committee discussed the risk of this project. From a medical perspective it is similar to a lecture hall and/or public place. Section 3.1 should say 'Yes'. It should be indicated on the form that the cyclophosphamide experiment will be performed at the Sunnybrook Hospital in Toronto. At least one of the lab members should be certified for Transportation of Dangerous Goods to ship the samples.

3.5 Karmazyn, M.

(Modification)

Tabled: HEK-293 should be listed in the "Approved primary and established cell lines" section. Sections 4.1 and 4.2 need to be filled out. CK2 is an oncogene. Does the adenovirus have CK2? The Committee needs a clear statement that no virus containing CK2 is being used. If a virus with CK2 is being used then Section 5.0 needs to be addressed. Without the Committee being clear on exactly what is being done with the adenovirus, this protocol will not be approved.

3.6 Guglielmo, C.

Tabled: In Section 1.2 it states that *Staphylococcus aureus* is zoonotic – thus it is a human and animal pathogen. This should be corrected. The MSDS for *S. aureus* needs to be from the supplier (Pulse Scientific).

3.7 Pickering, J. G.

(Modification)

Approved: Containment two is adequate for the added biohazard and should be noted.

3.8 Rodenhiser, D.

Tabled: The information on mycoplasma is not necessary. Section 4.0 needs to be completed to reflect the use of *E. coli*. The researcher needs to clarify which cell lines are Level 1 and which are Level 2.

3.9 Torchia, J.

(Revisit, September 2011)

Tabled: There are inconsistent statements throughout this form. The Committee needs a statement from the researcher that the viruses that he is using do not contain wild type p/CIP or ZNf217. If they do, then according to the Public Health Agency of Canada these are not level 2 or level 2+ experiments. If that is the case, then Section 4.0 needs to be filled out properly. If viruses contain mutations that are not oncogenic then it is okay. The protocol will not be approved until this issue is clarified. The clarification should come from the PI rather than the technician. The Committee is concerned and frustrated with the progress of this form.

3.10 Ferguson, P.

(Revisit, October 2011)

Tabled:

Is the lab infecting prostate cells? If so, what virus is used and what gene is being transduced? A statement should be made that the virus will not be propagated. The information on mycoplasma is unnecessary. The statement about ATCC in Section 2.3 needs to be deleted as ATCC does provide biosafety levels (see www.atcc.org or the information attached to the protocol). If hTERT is being transduced, which is an oncogene, Level 3 may be required. The handling and infection process is Level 3. Is the researcher using HEK 293T or HEK 293? The Committee is not clear on the source of the T-antigen.

3.11 Scholl, T.

Approved: No issues. The AUS protocol will deal with temozolomide (chemical hazard).

3.12 Kelly, G.

(Modification)

Approved: No issues.

Last Minute Additions

3.13 Strong, M.

(Modification)

Approved: Containment two is adequate for the added biohazard and should be noted.

3.14 Berube, N.

(Revisit, November 2011)

Approved: Section 7.0 should be 'Yes' since mice are the source of the primary cells mentioned in Section 2.2 (or they could be coming from another researcher, protocol 2008-041-02). HEK 293 cells should be listed in Section 2.3. If HEK 293 cells are being used then Section 5.0 needs to be completed to reflect their use. In Section 5.0, HeLa should be indicated as having HPV.

3.15 Others?

None.

4. Level 3 Tour**(J. Stanley)**

The facility is on schedule to reopen on February 1st. J. Stanley is giving a tour of the facility next week and any interested Committee members are invited to attend.

5. Vaccinia Update**(J. Stanley)**

The project was supposed to be done in DSB 6009 in Level 3. According to the researcher, there is some difficulty acquiring ACVS staff to support it and there is a vaccination problem for personnel. Dr. S. Siu will check with his office to see if the vaccination issue was resolved.

6. Letter for Dr. Mehta**(J. Millar)**

Dr. J. Millar has written a letter to be sent to Dr. Mehta regarding the lack of a biological safety cabinet in his laboratory. The letter will suggest that the researcher work with the on-site safety officer(s) and animal facility manager(s) to find a suitable facility with an appropriate safety cabinet or if possible, provide a suitable certification for the fumehood in the lab.

7. Next meeting date: February 10th?**(J. Stanley)**

Drs. Millar, Dekaban, Koval and Siu will be present. Dr. Barr and ACVS will let J. Stanley know their availability.

8. Other Business**(J. Millar)**

None.

9. Adjournment**(J. Millar)**

The meeting was adjourned at 10:35 am.