Potentially Hazardous Biological Agents Risk Assessment Form (6A)

Required for research involving microorganisms, rDNA, fresh/frozen tissue (including primary cell lines, human and other primate established cell lines and tissue cultures), blood, blood products and body fluids.

SRC/IACUC/IBC approval required before experimentation.

Student's Name(s) Rishitha Kudaravalli

Student's Name(s) (Notitude Readilla Valle				
Title of Project				
To be completed by the QUALIFIED SCIENTIST/DESIGNATED SUPERVISOR in collaboration with the student researcher(s). All questions are applicable and must be answered; additional page(s) may be attached.				
SE	ldenti group	TION 1: PROJECT ASSESSMENT Identify potentially hazardous biological agents to be used in this experiment. Include the source, quantity and the biosafety level risk group of each microorganism. The PBHA discription is project to reconstruct yeast DNA. The clone collection was originally tought from The monthly Secretary for the formation and the discription of the growth of the secretary for the consequence of the consequence of the consequence from the consequence.		
2.	Describe the site of experimentation including the level of biological containment. The experiment was conducted at CUNY York College with a mentor.			of biological containment. Ork College with a mentor.
3.	Describe the procedures that will be used to minimize risk (personal protective equipment, hood type, etc.). The procedures used to minimize risk include congressions protective equipment seen as glocos, tab coat and safety glasses, long paral and closed bod shoes.			
4.	What final biosafety level do you recommend for this project given the risk assessment you conducted? BSL 1			
	5. Describe the method of disposal of all cultured materials and other potentially hazardous biological agents. And the debased of the security placement the security was not wasted with effect of contained in a process in the disposed of in red suppressed while the state of the security beard of the secur			
1. What training will the student receive for this project? 1. What training will the student receive for this project?				
	There	will be proced	fural and safety training the occurs before any	y research takes place to ensure that correct protocols are followed.
2.	Experience/training of Designated Supervisor as it relates to the student's area of research (if applicable). Currently studying and research Huntingtin IBs and has been researching collular processes in neurons for five years			
	SECTION 3: For ALL CELL LINES, MICROORGANISMS AND TISSUES – To be completed by the QUALIFIED SCIENTIST or DESIGNATED SUPERVISOR - Check the appropriate box(es) below: Experimentation on the microorganisms/cell lines/tissues to be used in this study will NOT be conducted at a Regulated Research Institution, but will be conducted at a (check one) BSL-1 or BSL-2 laboratory. This study has been reviewed by the local SRC and the procedures have been approved prior to experimentation.			
	 Experimentation on the microorganisms/cell lines/tissues to be used in this study will be conducted at a Regulated Research Institution and was approved by the appropriate institutional board prior to experimentation; institutional approval forms are attached. Origin of cell lines:			
	Experimentation on the microorganisms/cell lines/tissues to be used in this study will be conducted at a Regulated Research Institution, which does not require pre-approval for this type of study. The SRC has reviewed that the student received appropriate training and the project compiles with ISEF rules.			
1	CERTIFICATION - To be SIGNED by the QUALIFIED SCIENTIST or DESIGNATED SUPERVISOR			
T a	The QS/DS has seen this project's research plan and supporting documentation and acknowledges the accuracy of the information provided above. This study has been approved as a (check one) 🗹 BSL-1/ 🗆 BSL-2 study, and will be conducted in an appropriate laboratory.			
1 ~	Lesley 8			Signature
(QS/DS P	rinted Name	B	Signature
1_	6/20/19			
Date of review (mmv/dd/yy)				
SECTION 4: CERTIFICATION - To be completed by the LOCAL or AFFILIATED FAIR SRC				
T,	The SRC has seen this project's research plan and supporting documentation and acknowledges the acquiracy of the information provided above.			
- ['	Maria P. Archdeacon Markhuller			
5	SRC Printed Name 128/20 Signature			
i	Date of review (mm/dd/yy)			