

**Regular Meeting of the WMed Institutional Biosafety Committee (IBC)**  
**November 17, 2025**  
**10:00am - 11:00am**  
**In person Room 423**

**Meeting Start Time:** The Chair confirmed there was a quorum and the meeting was called to order at 10:04am.

**Number of Regular members on the roster: 9; Number required for quorum: 5**

**1. Attendance**

<b>Voting Members Present</b>	
<b>Status</b>	<b>Initials</b>
Chair, Member	NH
Vice Chair, Member	CJ
Member	RV
Member	RP
Member	AC
Member	JD
Member	MC
Community Member	RS

<b>Voting Members Absent</b>	
<b>Status</b>	<b>Initials</b>
Community Member	SF

<b>Non-Voting Members Present</b>	
<b>Status</b>	<b>Initials</b>
SDRC, Ex-officio	CS
IBC Coordinator, Ex-officio	CJK
RSO, Ex-officio	PJ*

\*Attended via Teams

**2. Welcome and Updates**

- NH welcomed members to the meeting.
- CS officially appointed as the new SDRC.

**3. Conflicts of Interest and Confidentiality**

The Chair reminded all members present that any member of the IBC may not participate in the review or approval of a project in which he/she has been or expects to be engaged or has a direct financial interest.

**4. Review of Prior Minutes**

- a. **Approval of 8.21.2025 minutes**

**Discussion:** No comments.

**MOTION:** A motion was made by RS and seconded by CJ to approve the **8.21.2025** meeting minutes.

**VOTES:** Approve

# Present	Votes For	Votes Against	Abstained	Recused	Absent
8	8	0	0	0	1

**5. Protocol Reviews**

- a. **MC Protocol Closure IBC-2024-008 process administratively**
- b. **MY Personnel Amendments processed administratively**

**6. Biosafety Risk Discussion- NH/AC**

- a. **MTA received by TR laboratory:** Concern regarding biosafety risk, as the material consists of Lewy body formations derived from post-mortem human brain tissue. Standard cadaver precautions and BSL-2 practices were suggested. An IBC protocol is required to ensure oversight of the activities being performed, the locations where work will occur, tissue disposal procedures, and applicable cleaning and decontamination protocols.
- b. **Tamoxifen Disposal:** The SOP will be updated and finalized to specify disposal of tamoxifen-containing bedding as regulated medical waste for up to 72 hours following the final dose. After 72 hours, bedding may be disposed of as standard waste.
- c. **Toxicology BLS1 or BLS2:** The Toxicology group requested to remain at BSL1, however, the committee noted that their work involves large quantities of human blood and BSL2 practices should be followed.

**7. Radiation Safety Updates - PJ**

- The X-ray generator on the fifth floor is experiencing intermittent power failure from the main power supply. The estimated cost of repair is approximately \$50,000. Options for replacement of the unit are currently being evaluated.
- AC is continuing training with PJ for Radiation Safety Officer (RSO) duties and is exploring options to complete a radiation safety course to meet the Nuclear Regulatory Commission (NRC) requirement of 40 hours of classroom instruction.

PJ left at 10:24

**8. Occupation Health Updates - JD**

- Incident reporting software (VelocityEHS) has a go-live date scheduled prior to December 31, and the project is currently on track.
- A recent exposure incident occurred at Beacon, where two residents were potentially scratched by a bat found in resident sleeping areas. Rabies post-exposure prophylaxis and established protocols were followed.

**9. Biosafety Updates - AC**

- **October Biosafety Month:** Training workshops were well attended.
- **ABSA Training:** AC will attend the ABSA Practices and Principles of Biosafety course in the spring, a 40-hour crash course covering core biosafety topics.
- **Lab Inspections and Program Review:** Lab inspections and program review activities will begin in January. This year, the scope will be expanded to include safety inspections, auditing of CITI training records, an annual safety quiz, laboratory roster

updates, chemical inventory verification, and confirmation that laboratory door signage is current with appropriate contact information and biohazard postings.

- **Yearly Lab Registration:** A yearly laboratory registration process will be introduced. This initiative is intended to reduce the total number of IBC protocols by allowing laboratories to register biological materials, human cell lines, and acutely toxic chemical hazards annually.
- **SOP and Biosafety Manual Updates:** Updates to the SOPs and the Biosafety Manual are underway. The table of contents and SOPs are being separated into a list, with the goal of drafting and preparing most documents for review in spring 2026.

#### 10. IBC General Updates:

- **Annual Renewal Forms:** NH and CJK conducted an initial review of all protocols to assess exemption status.
- **IBC Member Training:** Member training will take place at the next scheduled meeting.
- **Stem Cell Committee:** The committee met on November 11 and is working to define its charge and edit the application materials.

#### 11. Adjournment:

Meeting ended at 10:49am.