



Institutional Biosafety Committee Meeting Minutes

Meeting Date: Oct 7, 2025

Location: Microsoft Teams

In Attendance:

Committee Members in Attendance:

Names	Names	Names
☒ Hyatt Green	☐ Geoff Holm	
☒ Brian Leydet	☒ Emily Ledgerwood	
☒ Andrew Newhouse	☒ Paul Massa	
☐ Peter Vandemark		

Also in Attendance:

Names	Names	Names
☒ Tiffany Castor	☒ Shannon Richter	

Called to order at 1:00pm

Old Business: NA

New Business:

1. No new applications to review
2. Updates at the federal level regarding biosafety regulation
 - a. Meeting Minutes
 - i. It is now mandatory to post committee meeting minutes on the official website.
 - ii. Full transcription of meetings is not required. IBC may opt to use AI-generated summaries instead.
 - iii. This process must carefully balance transparency with the protection of reviewers.
 - iv. Content deemed protected may be redacted, but publicly accessible information must remain available.
 - v. Principal Investigators (PIs) must be identified in some cases.
 - vi. NIH has clarified that reviewer comments do not need to be attributed to individuals.
 - vii. Moving forward, all researcher names, including those of PIs, will be redacted. **Action item:** Follow-up is planned to clarify this issue.
 - viii. Meetings will not be recorded. **Action item:** Follow-up is planned to clarify this issue.
3. Comments on revised IBC Policies and Procedures document
 - a. Section 3.1.1: Federal Mandate
 - i. Concerns were raised about the clarity of language regarding how Principal Investigators (PIs) should determine whether a technique poses a safety risk to end users.
 - ii. It was emphasized that the definition is intentionally broad to promote campus-wide awareness, but ultimately, the responsibility for risk identification lies with the PI. More detailed guidance is available elsewhere in the manual.
 - iii. Suggestions were made and adopted to rephrase the definition to emphasize techniques that “may” pose risks, though caution was advised to avoid unnecessary complexity.

- iv. The committee reaffirmed that PIs are responsible for conducting thorough risk assessments and should engage deeply with NIH guidelines, revising assessments as needed.
 - b. Section 3.2: Limitations and Importance of The NIH and CDC Guidelines
 - i. A concern was raised about the phrasing related to permits for non-native species, questioning why the language specifically targets non-native species when it appears in multiple sections.
 - ii. Suggested that “non-native” simply be removed here and throughout. Suggested change adopted.
 - c. Section 4.1.5. Prohibition of RG3 & RG4 Activities
 - i. **Action Item:** Changes to document, maybe here or elsewhere, to account for unexpected discovery of organisms in laboratories with insufficient containment procedures are needed.
 - ii. Noted that this IBC may not have the expertise to properly review and approve procedures intended to contain RG3 or higher organisms.
 - d. Section 4.1.8. Training Requirements
 - i. Section has undergone significant revision
 - ii. Discussion regarding which training should be required.
 - 1. It was resolved that anyone working in a laboratory on campus take the Basic Laboratory Safety Training offered by ESF EHS.
 - 2. It was resolved that anyone working with biohazardous agents acceptable for BSL-1 containment on campus must also take the *Basic Introduction to Biosafety* training available in CITI.
 - 3. It was resolved that anyone working with biohazardous agents requiring BSL-2 containment on campus must also take the *Initial Biosafety* training available in CITI to be refreshed every two years with the *Biosafety Retraining*.
 - 4. **Action Item:** More investigation into other trainings available via CITI will be conducted before making them mandatory for specific activities.
 - e. Section 4.2.4.1 Application Review Process
 - i. Noted that applications needing revision could just go back to the IBC chair instead of a designated committee member as written.
 - f. A modified version of the manual will be circulated for feedback. A vote on the updated manual will be scheduled.
4. Application and Training Administration
- a. Transition to PACs (digital system) will change procedures faculty will follow for IBC application and verification of training. IRBNet another option.
 - b. Number of Application Review Requests
 - i. Since February, only 2–3 applications have been submitted, all from the same Principal Investigator.
 - ii. Campus-wide notifications were sent recently, but only a few individuals have responded. The need for researchers to register with the Institutional Biosafety Committee (IBC) was emphasized in the message.
 - c. The group agreed on the need for a mainstream process for training and documentation, with the research office serving as a central resource. Information should flow from the research office to the IBC. **Action Item:** Revisit training distribution procedure with an intent to streamline.
 - d. **Action Item:** Follow up with IACUC Chair to determine which training is required for IACUC and how that’s handled.
5. Duration of Approved Protocols
- a. A five-year approval term with annual reporting was adopted as a more practical and efficient policy aligning with practices at other institutions.
6. Next IBC Meeting
- a. **Action Item:** Another committee meeting will need to be scheduled in the spring.