# **SECTION H**

| HAZARDOUS AGENT USE  |   |       |  |  |                            |   |                                     |
|--|---|-------|--|--|----------------------------|---|-------------------------------------|
| Check this box if there are OESO SOPs (safety SOPs) attached to this protocol. |   |       |  |  |                            |   |                                     |
| H.1. HAZARDOUS AGENTS  |   |       |  |  |                            |   |                                     |
| TABLE H.1.A. HAZARDOUS AGENTS  |   |       |  |  |                            |   |                                     |
| Please indicate the type of hazardous agent(s): (check all that apply)         |   |       |  |  |                            |   |                                     |
|  | CHEMICALS/DRUGS   |       | RADIATION                                  |  |                            | BIOLOGICALS   |                                     |
|  | Carcinogens/mutagen   | s [   |  |  | Laser                      |   | Human/NHP cells, tissues, or fluids |
|  | Tissue fixatives (formal paraformaldehyde)                  | in, [ | Irradia                                    |  | or/x-ray machines          |   | Stem cells                          |
|  | Toxicological agents Other hazardous chemicals (list below) |       | Radioactive materials                      |  |                            | Active virus/bacteria/prion Attenuated virus/bacteria Recombinant DNA |                                     |
| List of Other Hazardous Chemicals:   |   |       |  |  |                            |   |                                     |
| H.2. DETAILS OF HAZARDOUS AGENT USE  |   |       |  |  |                            |   |                                     |
| TABLE H.2.A. HAZARDOUS USE AGENTS  |   |       |  |  |                            |   |                                     |
| To add additional agents, please attach a separate document.                   |   |       |  |  |                            |   |                                     |
|  | AGENT (IDENTIFY)  | FRE   | DOSE AND<br>FREQUENCY OF<br>ADMINISTRATION |  | ROUTE OF<br>ADMINISTRATION | DU  | IRATION OF TREATMENT                |
|  |   |       |  |  |                            |   |                                     |
|  |   |       |  |  |                            |   |                                     |
|  |   |       |  |  |                            |   |                                     |

### Institutional Animal Care & Use Committee (IACUC)

#### H.2.1. FOR BIOLOGICALS:

Note 1: Complete and attach an SOP for BSL2/ABSL2 (Biological Safety Level 2).

**Note 2**: The use of viral vectors and recombinant DNA must be approved by the <u>Institutional Biosafety</u> <u>Committee (IBC)</u>.

## H.2.2. FOR CHEMICALS/DRUGS:

**Note 1**: Customize and attach an SOP describing safe use of each hazardous chemical/drug on DU's Particularly Hazardous Substances (PHS) list and ay nanomaterials.

\*DU's Particularly Hazardous Substances (PHS) list

\* DU's SOP Templates for Hazardous Chemicals / Drugs

**Note 2**: If these agents or harmful metabolites will be excreted, the SOP for Handling Animals Dosed with Toxic Chemicals must be reviewed and attached with the completed door sign.

**Note 3**: If tissue will be harvested, please indicate what method will be used for preservation (formalin, paraformaldehyde, flash freezing, etc.). If formalin or paraformaldehyde will be used, a customized SOP is required.

#### H.2.3. FOR RADIATION:

**Note 1**: For information on proper procedures for use of radiation in animals, please contact the DU Radiation Safety/Hazardous Materials Manager at 303-871-4044.