## Principal Investigator Assurance (USAMRMC Research Proposal Safety Information – Safety Program)

- I assure that I have involved the Facility Safety Director/Manager in the planning of this research proposal, discussed with him/her all aspects of the proposal that relate to occupational health and safety, and will help him/her prepare the annual Facility Safety Plan Status Report.
- I assure that I will comply with my institution's safety program and its requirements.
- I understand that I am directly responsible for all aspects of safety and occupational health specific to my research protocol.
- I assure that I will report to the Facility Safety Director/Manager any changes in the safety or occupational health practices due to changes in my originally planned research.
- I assure that hazards associated with my research have been identified, eliminated and/or controlled.
- I assure that all Facility Safety Plan requirements are in compliance with Local, State, and Federal general industry standards.
- If applicable, I assure Biological research programs will follow the recommended guidelines established in the latest editions of the CDC-NIH publication <u>Biosafety in Microbiological and</u> <u>Biomedical Laboratories</u> (BMBL); Army Regulation 385-10, Chapter 20 (Biological Safety); and DA Pam 385-69 (Safety Standards for Microbiological and Biomedical Laboratories).
- Use of Infectious Agents and Toxins (IAT) as defined below: 

   Yes 
   No
   "Infectious Agent or Toxin = a viable microorganism, or its toxin which causes or may cause human disease, and includes those agents and includes those agents classified as Risk Group 2 or higher as defined in the latest edition of the Biosafety in Microbiological and Biomedical Laboratories (BMBL)."

Name of Principal Investigator (print)			
Signature of Principal Investigator			Date
Mailing Address:			
		Street	
	City	State	Zip Code
Phone Number:			
Fax:			
E-mail Address:			