West Texas A&M University
Institutional Biosafety Committee

Appendix A. Recombinant DNA/Viral Vectors

1. **Enter host (target) name (e.g. *Mus musculus*) and information into Table A of Part II of the IBC Application form.**

2. **Enter vector name, if used (e.g. adeno-associated virus (AAV)) and information into Table A of Part II of the IBC Application form.**

3. **Enter information regarding the cloned DNA insert (e.g. insulin) into Table B below:**

Table B. Insert Characteristics.

In Table B below, enter information about each vector or host DNA insert. Enter the appropriate Host ID from Table A in the full protocol form, to indicate which host will contain the insert.

Insert ID	Host ID (from Table A)	Source of Insert (Ex: human)	Insert Source Risk Group	Insert Name (Ex: insulin)	Insert Characteristic/Function (Ex: hormone)
I-1	A-				
I-2	A-				
I-3	A-				
I-4	A-				
I-5	A-				
I-6	A-				
I-7	A-				
I-8	A-				
I-9	A-				
I-10	A-				

4. **Which sections of the NIH Guidelines does the research or teaching described in this protocol fall? (Choose all that apply for each agent.)**

Agent ID (from Table A)	Agent Genus, Species	Strain	BSL/ABSL/ BL-P	Sections of the NIH Guidelines that cover research/teaching. (See below; include all that apply.)
A-1				
A-2				
A-3				
A-4				
A-5				
A-6				
A-7				
A-8				
A-9				
A-10				

Rules pertaining to Sections III-A, III-B, III-C, III-D, III-E, and III-F of the *NIH Guidelines* can be found at:

https://osp.od.nih.gov/wp-content/uploads/NIH_Guidelines.html#_Toc446948316

5. **Insert Characteristics:** Please answer the following questions regarding the inserts listed in Part II.

Yes	No	
☐	☐	From a Risk Group 2 Agent?
☐	☐	From a Risk Group 3 or 4 Agent?
☐	☐	From an animal or plant pathogen not affecting humans?
☐	☐	Encodes for a known or suspected oncogene?
☐	☐	Encodes for a toxin molecule (whole or partial)? If yes, please describe the LD50 of the toxin and whether the insert will code for an active toxin.
☐	☐	Will antibiotic resistance be transferred to microorganisms? If Yes:

- Describe what antibiotic resistance genes will be transferred to which agents.

- Explain why this action would not fall under Section III-A-I of the NIH Guidelines. Include relevant references.

6. **Viral Vector Information:** If viral vectors are used, complete this section separately **for each viral vector**.

Agent ID from Table A on the full protocol form: _____

- Is the virus replication competent? ☐ Yes ☐ No

- Are assay systems used to measure the titer of replication of competent viruses that may be present? ☐ Yes ☐ No

If Yes, please describe:

- What percent of the original viral genome remains in the vector? _____

- Describe the genome organization of the viral vector. Include information about what genes or genome regions have been removed.

- The possibility of homologous recombination with endogenous viruses exists. Indicate the reversion rate and the recombination event of such a possibility. Describe methods you will use to ensure that replication of competent viruses is excluded.