

**BIOSAFETY LEVEL CONTAINMENT REQUIREMENTS FOR  
PROCEDURES WORKING WITH MACAQUES**  
**Institutional Biosafety Committee (IBC)**  
**The University of Mississippi Medical Center (UMC)**  
 (Approved September 2004)

The Center for Disease Control and Prevention and National Institutes of Health manual, *Biosafety in Microbiological and Biomedical Laboratories* recommends Biosafety Level 2 (BSL-2) containment for “all activities involving the use or manipulation of tissues, body fluids and primary tissue culture materials from macaques” (<http://www.cdc.gov/od/ohs/biosfty/bmbl5/bmbl5toc.htm>, Section VIII-E, Agent Summary Statements, Viral Agents, *Herpesvirus simiae* [also known as *Cercopithecine herpesvirus*]). BSL-2 is achieved by a combination of standard and special practices, safety equipment (primary barriers) and laboratory facilities (secondary barriers) (*ibid*, Section II).

**Primary Barriers** (for details, *ibid*, Section III)

1. Biosafety cabinet (BSC); where noted, a down-draft necropsy table (NT) plus eye protection is acceptable.
2. Eye protection (full-face shield preferred, but goggles and mask acceptable)
3. Protective clothing (long-sleeve coats, gowns, smocks or other uniforms).
4. Gloves (two pair when appropriate).

To provide adequate employee protection from risk of exposure to potential macaque-borne pathogens, the UMC IBC approves the use of the following combination of primary barriers for the procedures listed below.

Check ALL procedures used in your research.

<u>Procedure</u>	<u>Primary Barriers</u>
<input type="checkbox"/> Necropsy	1 (BSC or NT+2), 3, 4
<input type="checkbox"/> Harvesting Fresh Tissue	1 (BSC or NT+2), 3, 4
<input type="checkbox"/> Homogenization of Fresh Tissue	1 (BSC), 3, 4
<input type="checkbox"/> Whole Body Perfusions with Fixatives	2, 3, 4
<input type="checkbox"/> Survival (sterile surgical field) Surgery	2, 3, 4
<input type="checkbox"/> Insertion/Maintenance of Access/Monitoring Devices	2, 3, 4
<input type="checkbox"/> Treatment/Cleaning of Wounds	2, 3, 4
<input type="checkbox"/> Clean-up/Disposal of Animal Waste	2, 3, 4

Print Supervisor's Name \_\_\_\_\_

Position \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Copy: 1) to IBC, 2) maintained by supervisor and 3) in Biosafety Manual.**