**Department of Veterans Affairs**

**VA Pittsburgh Healthcare System**

**Research and Development Office**

Guidelines for Principal Investigators Vacating Research Laboratories at the

VA Pittsburgh Healthcare System

1. **Purpose**

The purpose of these guidelines is to define requirements for Principal Investigators (PIs) that are vacating research laboratory space at the VA Pittsburgh Healthcare System (VAPHS).

1. **Introduction**

The transfer of a research laboratory is a complex operation that raises a number of concerns. It is important that hazardous materials are handled in the proper manner during the transfers. The following are a set of guidelines to help PIs and their staff in the proper steps to treat and handle these hazardous materials as well as steps to take to complete administrative items before the departure. Investigators leaving the VAPHS must contact the Associate Chief of Staff for the Research and Development Department (ACOS/R&D) and the Business Manager (Business Manager/R&D) at least sixty (60) days in advance of the move (when possible) and should consult with the relevant administrators to plan the relocation.

1. **Guidelines for Leaving VAPHS**

**General Procedures for Closing Laboratories:**

* When a laboratory is vacated, the PI is responsible for ensuring that rooms are clean and safe for the next occupant or for individuals performing planned renovations. All chemical and biological materials must be removed from the vacated space. If there are plans to transfer chemicals or other materials to another VAPHS investigator, then the proper forms must be filled out and approved before any transfer can be made. For information on the appropriate forms that must be approved, contact the IBC Coordinator (412-360-2382). In addition, contact the appropriate personnel with any excess radioisotopes, microbial agents, chemicals, and recombinant DNA used in this project. Contact the Biosafety Officer to assist with any needed Material Transfer Agreements (MTAs) to transfer materials.

* + Properly dispose of any unwanted materials. Contact the GEMS Coordinator at 412-822-3197 with any questions regarding chemical waste disposal. For information on disposal of biohazardous waste, contact the Biosafety Officer for Research at 412-360-2842. In addition, investigators must do the following when relocating hazardous materials to another facility or institution:
		- Moving Biological Materials – Utilize a Department of Transportation (DOT)-licensed hazardous material carrier to transport biological materials (microbial agents, toxins, animal and human materials) to another laboratory destination via public thoroughfare.
		- Moving Chemicals – Utilize a DOT-licensed hazardous material carrier to transport any chemicals to another laboratory destination via public thoroughfare. Toxic materials, carcinogens, highly reactive chemicals, controlled drugs, and other restricted chemicals should be moved by trained laboratory staff only. All chemicals must be properly labeled and packaged. Incompatible chemicals must not be placed together during storage or transport. Secondary containment should be utilized to control spilled materials.

Please be considerate of those individuals who are required to enter your former laboratory once it is vacated. Be mindful that these individuals may not be familiar with the hazards associated with the materials in your laboratory or equipment utilized in your research. **\*\*Please note that the PI MUST contact the Biosafety Officer five (5) business days before the official vacate date to ensure that the lab is properly cleaned and that all equipment and supplies are removed.**

* + Empty, disinfect, and/or clean all equipment before packing or moving (e.g., refrigerators, centrifuges, etc.). All lab equipment must be cleared by the Research and Development Office prior to disposal or relocation.
	+ Disinfect and/or clean all potentially contaminated surfaces thoroughly, including surfaces of chemical fume hoods, bench tops, shelves, and biological safety cabinets.
	+ Remove regulators from all compressed gas cylinders, replace the protective cap, and ensure proper labeling. Contact the gas distributor to have the gas cylinders removed.
	+ Laboratory personnel are NOT permitted to perform or certify the decontamination of a biological safety cabinet (BSC) that is being moved. A vendor must be contacted to conduct the decontamination process and certify the decontamination of the BSC prior to moving it.
	+ Departing personnel must go through the Clearance Process and return their identification badges to the VA Police Department. Keys to research laboratories must be given to the Business Manager/R&D (412-360-2387). If personnel are considered Without Compensation (WOC), then the badge and keys must be turned in to the R&D Program Support Assistant (412-360-2380).

**Radiation-Producing Devices and Materials:**

* If any radiation-emitting equipment (e.g., X-ray device) will be removed, relocated, or discarded, the Radiation Safety Officer must be notified (412-360-3221).
* If any radioactive material is stored in the laboratory, contact the Radiation Safety Officer to relocate any radioactive materials to another laboratory, to dispose of radioactive materials, to remove these materials from the VAPHS radioactive material inventory, and to conduct a final survey of the vacated area. It is recommended to contact the Radiation Safety Officer at least sixty (60) days before vacating the laboratory space.

**Studies Using Animal Subjects:**

* All Institutional Animal Care and Use Committee (IACUC) protocols for which the departing investigator is designated as the PI must be closed. A study closure form must be completed and submitted before approval for closure can be granted. Alternatively, if the protocol is going to be maintained by another PI at VAPHS, then this information must be designated via an ACORP Amendment Form.
* Prior to terminating IACUC protocols, all animals assigned to those protocols must be euthanized as specified in the protocol, transferred to another investigator’s protocol, or exported to the institution to where the PI is relocating. Animals can only be transferred if they have not, yet, undergone manipulation, or the recipient protocol specifies the same manipulation procedures as the original protocol. To export rodents to another institution, the PI must obtain written approval from the Animal Research Facility Supervisor (or designee). Additional information on this can be found in the VAPHS Policy #A-006.
* If any departing personnel hold access to the secure animal housing facilities, the Animal Research Supervisor (412-360-6107) must be informed of the individual’s departure.
* The Research Compliance Officer must perform an audit of the study before it can be closed. For questions on how to begin this process, contact the Research Compliance Officer at 412-822-1577.

**Studies Using Recombinant DNA:**

* All protocols approved by the Institutional Biosafety Committee (IBC) for which the departing investigator is designated as the PI must be terminated or an alternate PI should be designated via the IBC Amendment Request Form. The IBC Coordinator can provide further details about these procedures (412-360-2382).
* The Research Compliance Officer must perform an audit of the study before it can be closed. For questions on how to begin this process, contact the Research Compliance Officer at 412-822-1577.

**Studies Using Human Subjects:**

* PIs leaving the institution are responsible for notifying the Institutional Review Board (IRB) well in advance of their departure (at least 60 days prior) so that arrangements can be made to either close the study or name another appropriately qualified individual currently at the institution to serve as the PI. At VAPHS, research must be formally closed; it cannot simply expire. According to VAPHS IRB Standard Operating Procedures (SOPs), Section 4.E states that the PI must complete all required documentation at the completion or termination of the study and retain all research records for the applicable retention period according to all applicable VA and Federal record retention requirements. The IRB Office staff can be contacted at vhapthIRB@va.gov .
* Tissue transfers - If the IRB-approved study involved off-site storage of biological specimens, written confirmation by the storage sites that these samples have been destroyed must be obtained prior to study closure. If human subjects’ specimens are to be retained after the end of the study for future research, the IRB-approved protocol/application and consent form must outline this process. Current local, VA, and other Federal requirements must be met for handling, use and storage of biological specimens and data.
* Research drug supplies should be disposed of as indicated by the sponsor of the study. Investigators can also contact the Investigational Drug Service Pharmacist (412-360-3260) for instructions on drug disposition.
* The Research Compliance Officer must perform an audit of the study before it can be closed. For questions on how to begin this process, contact the Research Compliance Officer at 412-822-1577.

**Studies Considered Exempt or Not Human Subjects:**

* PIs with approved studies that are considered either Exempt or Not Human Subject must fill out and submit a Study Closure Form for the Research Scientific Evaluation Committee (RSEC).

**Fiscal Matters:**

* With respect to all fiscal matters and contract matters, contact the Business Manager/R&D (412-360-2387).

**Data Transfer:**

* Data transfers must be reviewed and approved by the Information Security Officer and Privacy Officer prior to transfer.

**Laboratory Closure Checklist:**

* A laboratory closure checklist is attached to the guidelines. This checklist will be used by the Biosafety Officer to confirm all the items in this document have been covered prior to the investigator leaving the premises. The checklist must be signed by the Principal Investigator, the Biosafety Officer, the Industrial Hygienist, the Radiation Safety Officer (if applicable), and the ACOS/R&D.