

eFSAP APHIS/CDC Form 1 Amendments

Section 7 A/C Amendment: Add New Work Objective





Click Form 1 on your entity's landing page.

Home	Form 1 Fo	orm 2 Form 3 Form 4 Inspections Admin Center
University of Select A LEAD AGENCY: CDC	Gents REGISTRATION STATUS: Approved	REGISTRATION EXPIRES: 01/30/2022
Facility Address: Contracting Andress		Registration #: 20200130-091620
Responsible Official Name:	Responsible Official Business #:	Responsible Official Emergency #:
Primary FSAP POC:	Primary POC Office #: 123-456-7890	Primary POC Mobile #: 999-124-7891
Secondary FSAP POC:	Secondary POC Office #: 225-222-2222	Secondary POC Mobile #: 333-333-3333

A Notifications

Archive Seleo	ted				Current Archived	Flagged O	
Select All	From ~	Туре 🗸	Date And Time	Notification		~	~

Select "Amend".

Select an Action

Select an action for the APHIS/CDC FORM 1 APPLICATION FOR REGISTRATION FOR POSSESSION, USE, AND TRANSFER OF SELECT AGENTS AND TOXINS.

An entity will complete APHIS/CDC Form 1 to apply to possess, use, or transfer select agents and toxins (as described in 7 CFR part 331, 9 CFR part 121, and 42 CFR part 73). The APHIS/CDC Form 1 is also used to amend an approved registration.

×

View	Amend
)	

Exit

Use the dropdown to select "Section 7AC – Add New Work Objective ".

Select the type of Amendment you would like to perform	
Section 7AC - Add New Work Objective	~
Complete your cover letter for this amendment:	
Add additional work for PI Beck.	
	.8
	Ok

Complete your cover letter and click **OK**. A dialog box will appear. Click **OK**.

webapp.ipsastest.com says

Proceeding will create the amendment in a draft state. The draft may be withdrawn later from the Amendment Review and Discussion page.



Select Add Work, Add Work and Storage or Add Storage Only.

Add Work	Add Work and Storage	Add Storage Only
Designate BioSafetyLevel 1	Designate Additional Biosafety Levels (if app	icable)
		×
Designate Select Agent(s) and Toxin(s)		Designate Principal Investigator
	^	
Designate Building and Room		· · ·
		~ ~
		Cancel Reset Proceed

Additional fields will become available based on your selection.

Select Add Work and Storage, use the dropdown to designate a biosafety Level, and additional biosafety levels if applicable. Designate the Select Agent and Toxin. Click

Proceed.

Multiple agents,

Pls, buildings,

and rooms may

be selected by

pressing Ctrl +

click

Add Work	Add Work and Storage	Add Storage Only
Designate BioSafetyLevel 1 BSL3	Designate Additional Biosafety Levels (if applic NIHBL3 NIHBL3-LS	able)
Designate Select Agent(s) and Toxin(s) Non Tier 1 Bacillus anthracis Pasteur strain Brucella abortus Brucella suis Tier 1 Bacillus cereus Biovar anthracis Burkholderia mallei Burkholderia pseudomallei Francisella tularensis		Designate Principal Investigator Non Tier 1 Britney Beck David Howard Tier 1 James Johnson Killian Lopez Sam Samuelson
1414 Building 1 Building 2	Tier 1 Lab and Storage Lab and Storage Lab and Storage Tier 1 Lab and S	e Suite / BSL3/NIHBL3 Lab and Storage e Suite / BSL3/NIHBL3 Lab Only e Suite / BSL3/NIHBL3 Lab only (2) Storage Room, ABSL3, BSL3 Cancel Reset Proceed

Enter an objective of work and respond to question 2-10. Click Save and Proceed.

Section 7C - Description of Work		
Work Objective: WO001849.001.001 - Work and Storage		
Save and Proceed Save Cancel		
Biosafety Levels:	BSL3 NIHBL3	Add/Remove
Agents/Toxins:	Brucella suis	Add/Remove
Principal Investigators:	L Britney Beck	Add/Remove
Buildings/Rooms:	Building 2 - Room 1 - Tier 1 Lab and Storage Suite \ BSL3 Lab and Storage	Add/Remove
Objective of Work		

Review and/or edit the amendment cover letter. If there are attachments to add, click the corresponding letter (A-G).



Attachment B - Work with Regulated Nucleic Acids, Genetic Modification of Select Agents or Toxins, Recombinant/Synthetic Nucleic Acids, or Recombinant/Synthetic Organisms

1: Will work involve possession, use, or transfer of the following?

a. Nucleic acids that can produce infectious forms of select agent viruses

Yes No

b. Recombinant and/or synthetic nucleic acids that encode for the functional form(s) of any select toxins if the nucleic acids (i) can be expressed in vivo or in vitro or (ii) are in a vector or recombinant host genome and can be expressed in vivo or in vitro.

Yes No

c. Select agent viruses, bacteria, fungi or toxins that have been genetically modified

Yes No

2: Will work involve the following with select agents and/or toxins?

a. Introduction and/or modification of genetic elements

Yes No

b. Recombinant or synthetic nucleic acids.

🔘 Yes 🔘 No

c. Recombinant or synthetic organisms

🔘 Yes 🔘 No

d. Reverse genetics system to produce infectious forms of select agent viruses, or any complete set of reagents that would allow rescue of infectious virus available for use by a PI at the entity.

Yes No

3: Will a restricted experiment be performed as defined in 42 CFR 73.13, 7 CFR 331.13 or 9 CFR 121.13?

Yes No

4: Will work involve possession, use or transfer of a product of a restricted experiment?

Yes No

7: An Institutional Biosafety Committee (IBC) reviews and approves protocols to perform recombinant work with select agents and toxins at this facility.

Yes No



Answer the required questions for the attachment and click **Save changes**.

Once the required attachments are completed, click **Submit**.

Amendment Cover Letter	General Discussion	
Add additional work for PI Beck.		^
	Type your message here	
		Send
View amended data		
Withdraw Amendment	Review or Make Changes	Save Submit

Once submitted a notification will display on the home page.

fte advanced Amendment View 12/6/2019 11:28:16 AM Amendment #330946 - Section 7a/c - Add New Work Objective amendment was modified (State: Pending)

Additional Assistance

- □ The <u>eFSAP Resource Center</u> has resources to assist with the use of eFSAP.
- For technical assistance with eFSAP, or for assistance with the Secure Asset <u>Management System (SAMS), please submit a help request ticket at eFSAP_Customer</u> <u>Support Request Form, email eFSAPSupport@cdc.gov, or call 1</u> (877) 232-3322.
- For all other inquiries regarding your entity's registration, please contact your designated FSAP point of contact (POC).

