

**SEATTLE CHILDREN'S RESEARCH INSTITUTE  
OPERATING POLICIES / PROCEDURES**

**DEPARTMENT:** Institutional Biosafety Committee (IBC)  
**POLICY NUMBER:** IBC-005  
**REPLACES:** IBC-05 (6/7/06)  
**EFFECTIVE DATE:** 10/15/08  
**REVISION DATE:** 10/15/08  
**POSTED FROM:** Exempt per RIA-01-14.2.3

**TITLE:** Monitoring Approved Protocols

**SUMMARY:**

The purpose of this policy is to describe how the IBC will monitor approved protocols to ensure that procedures are carried out in the laboratory as described in the protocol.

**POLICY/PROCEDURE:**

- 005-1 The Principal Investigator (PI) shall be responsible for compliance oversight. Announced or unannounced inspections of laboratory areas may be conducted at any time to verify that procedures are consistent with those described in approved protocols.
- 005-2 It is the responsibility of all investigators and research staff to conduct research in compliance with approved protocols and report non-compliance if, when, or where it is observed.
- 005-3 The occasion may arise where an investigator or institutional representative becomes aware of unexpected or unintentional changes in agents used, procedures conducted, location where procedures are conducted, or unauthorized personnel working with bio-hazardous agents. It is the responsibility of all individuals to report these incidents to the IBC.

Submitting Office: Institutional Biosafety Committee

Approved by:

\s\ David Moore 10/15/2008  
IBC Chair | Director, Research Technical Operations

\s\ James B. Hendricks, PhD 10/15/2008  
President, Seattle Children's Research Institute