**Part D   : Biological Agents / Materials containing biological agents Not Listed Elsewhere**

*Duplicate Part D Form* *Updated 02/2025*

This page is designed to be submitted with a complete Biological Use Authorization (BUA) form. Refer to the directions on the BUA. Do not duplicate more than 5 times, instead contact the EHS Biosafety Section.

1. Name of Biological Agent:  Strain, Designation :

Source of isolate(s):

1. Associated with disease in: **Human (Risk Group 2** , **3****)**  **Animal** **Plant (*plant pests*)** **None per lit.**

**review** (skip to question #9)

**For agents associated with disease in humans**

1. Adverse effects on humans including signs/syptoms (for resources see pp. 11-12 of the [NC State Laboratory Biosafety Manual](https://drive.google.com/open?id=0Bwfv9WVwZC73R3lRclA1RTlPSjQ)):

1. Modes of Transmission
2. Natural mode(s) of transmission in the absence of mitigating factors: **examples: inhalation, ingestion, inoculation, skin/mucous membrane contamination**
3. Known or suspected routes of transmission of laboratory-associated infections: **examples: inhalation, ingestion, inoculation, skin/mucous membrane contamination**
4. Vaccines or treatments available: **do not leave blank, indicate unknown, N/A as applicable**
5. Is agent listed on the [CDC List of Select Agents](http://www.selectagents.gov/SelectAgentsandToxinsList.html)?  **YES**  **NO**
6. Is antibiotic resistance expressed for agents listed in this Part D?  **YES**  **NO**

List other markers *(indicate “N/A” if not applicable*)?

1. Are you isolating, purifying, or concentrating toxin from the agent?  **YES**  **NO**

If *YES*, **also complete Part G Biological Toxins**

1. Scale of growth/culture of agent : (C*heck all that apply. If 1 liter or greater, describe in Narrative or in Other Comments below*):  **Agent is not grown or cultured**  **Diagnostic scale only (less than 10 Petri dishes or T-25 flask at a time)**

**Up to 1 liter volumes**  **Between 1 and 10 liters**  **Greater than 10 liter volume**

1. Are the organisms and/or biological materials concentrated/purified in viable form from cultures?  **YES**  **NO**

If yes, describe method(s) of concentration, safety precautions, and location:

1. Will open cultures or other materials be manipulated outside a BSC?  **YES**  **NO**

If yes, describe this location here and use the Biosfaety Narrative to describe measures to be used for the protection of

personnel and/or the environment or to reference safety SOPs:

1. Are all **decontamination and disinfection** procedures listed on Part B of this form appropriate for this material?  **YES**  **NO**

If *YES* skip to #13. If *NO*,, indicate which decontamination and disinfection procedures differ from Part B (*check all that apply*):

Decontamination and disinfection procedures in use must follow the [NC State Laboratory Biosafety Manual](https://drive.google.com/open?id=0Bwfv9WVwZC73R3lRclA1RTlPSjQ).

Work surfaces and equipment are disinfected after working and at the end of each day. Describe procedure including chemical disinfectant, concentration, and contact time:

Liquid waste is disinfected prior to sewage disposal. Describe procedure including chemical disinfectant, concentration, volumes, and contact time:

1. If a pathogen of livestock animals, avian species, or for plants (including plant pests), have you obtained a valid APHIS permit?

**YES**  **NO**  **In progress**  **Not applicable**

1. Will the organisms and/or biological materials be used in animals?  **YES**  **NO**

*If yes*, complete Part F Live animal use.

1. Will the organisms and/or biological materials be used in plants?  **YES**  **NO**

*If yes*, describe method(s) of plant disposal:

1. Will the organisms and/or biological materials be used in arthropods?  **YES**  **NO**

*If yes*, complete Part E Arthropods *unless* the species does not pose a public health concern.

1. Other comments (*space expands indefinately*):