

SAINT LOUIS UNIVERSITY

Policy on Vaccination of Researchers

Policy Number: RC-008 Version Number: 1.0
Classification: Research Compliance Effective Date: 02JAN2013

Responsible University Official: Vice President for Research

1/0 INTRODUCINON

Saint Louis University endeavors to provide for the safety and wellbeing of faculty, staff, and students engaged in research, including visiting scientists and students. To assure the safety and maximum protection of all individuals conducting research in Saint Louis University research laboratories and other facilities, the University has established this Policy on Vaccination of Researchers.

240 DENDISHMORS

Animals: Any live animal used or intended for use in research, research training, experimentation, or biological testing or for related purposes.

Animal Facility: Any area at Saint Louis University where research animals are housed, or where SLU researchers observe or perform any procedures on animals. (Reference: Policy Number AC-006.)

CDC: U.S. Centers for Disease Control and Prevention

IACUC: Institutional Animal Care and Use Committee.

IBC: Institutional Biosafety Committee.

Laboratory: Any Saint Louis University research laboratory, teaching laboratory, clinical laboratory, or animal activity areas (facilities, procedure rooms, and housing areas), including field study sites on or off campus. Includes any laboratory facilities or adjoining corridors for which card access is required to gain entry*.

Researcher: For purposes of this policy, "researcher" means any individual engaged in research in laboratory, as defined above, involving infectious or potentially infectious materials for which there is currently a vaccine available to provide prophylactic protection against infection.

* Example: Edward A. Doisy Research Center (DRC) and other laboratory facilities of similar layout.

3.0 SCOPE

3.1 Applicability to Saint Louis University Laboratories: This policy is applicable to all faculty, staff, and students working in Saint Louis University animal facilities and laboratories, as defined above, including visiting scientists and students.

4.0 POLICY & PROCEDURES

- **4.1 IBC Protocol Submission:** Faculty researchers are required to submit complete protocols to the IBC for review and approval, inclusive of due diligence concerning whether a vaccine is available for prophylactic protection against particular biological agents being used in research.
- 4.2 IBC Vaccination Determination: The IBC makes determinations of whether a particular vaccine (to be administered to researchers involved in working with a particular biological agent) is required, recommended, or not recommended. The IBC takes into consideration any CDC or other federal, state or local agency requirements and recommendations in making its determinations. However, each IBC determination is protocol specific.
- **4.3 Finality of IBC Vaccination Determinations**: IBC determinations regarding whether a specific vaccination is required, recommended, or not recommended are final.
- 4.4 Post-Vaccination Waiting Period: Required vaccinations must be (and recommended vaccinations should be) administered to researchers prior to beginning work with the infectious material, with an appropriate post-vaccination period. The appropriate post-vaccination period is determined by the Occupational Health Physician on a case-by case basis and will be consistent with current immunization practices. The SLU Occupational Health Physician will communicate the post-vaccination waiting period during the course of administering the medical component of the SLU Occupational Health Program.
- 4.5 Exceptions: In rare instances, exceptions to vaccination requirements may be permitted for documented medical or religious reasons only. An appropriate declination form, available through Employee Health, is required to be completed and submitted to the Director of Employee Health. The Director of Employee Health will request and confidentially review all necessary documentation and report the declination to the IBC for further consideration. The IBC determinations may include, but are not limited to, any or all of the following:
 - 4.5.1 Limiting the activities of the researcher who is declining vaccination (the "unvaccinated researcher") to low risk procedures, as determined by the IBC.
 - 4.5.2 Limiting after-hours work by the unvaccinated researcher.
 - 4.5.3 Restricting supervisory work by the unvaccinated researcher to "dry runs" with no use of the active biological agent (for which the vaccination is being

- declined) involved in the dry run.
- 4.5.4 Requiring the unvaccinated researcher to wear an elevated level of personal protective equipment (PPE), including respiratory protection, (e.g. Powered air purifying respirator (PAPR)), protective outerwear, (e.g. Tyvek suit, double gloving, etc.)
- 4.5.5 Requiring that work with the biological agent be elevated to a higher biosafety containment level (e.g. performing all work with the infectious agent in a BSL-3 laboratory instead of BSL-2, if normally a BSL-2 agent).
- 4.5.6 Requiring more rigorous hygiene standards, including showering immediately after working with the agent before leaving the BSL-3 or ABSL-3 suite.

5.0 IMPLEMENTATION AND AUTHORIZATION

- 5.1 The Vice President for Research is responsible for procedures to implement this policy.
- 5.2 The principal investigator named on the approved IBC protocol is responsible for all activities in the laboratory where his or her researchers are engaged in biological research, including their compliance with this policy on vaccination of researchers.
- 5.3 Exceptions to this policy (exclusive of those addressed in section 4.6 above) must receive prior written approval from the Saint Louis University Vice President for Research or the appropriate designee.
- 5.4 Changes in this policy or any of its procedures or forms require approval by the Vice President for Research or the appropriate designee.

6.0 NON-COMPLIANCE AND SANCTIONS

- 6.1 Non-compliance must be reported to the Saint Louis University Vice President for Research, the Office of Environmental Health and Safety, or if anonymity is desired, through the University's Anonymous Compliance Hotline: 877-525-5669.
- 6.2 Failure to comply with the conditions of this policy may result in the immediate removal of the researcher from research activities until corrective actions have been taken, suspension of the approved principal investigator's research involving the biological material in question, or both.
- 6.3 Gross or repeated violations of this policy by faculty, staff, students or visiting scientists or students may result in disciplinary action. Disciplinary actions for non-compliance can result in suspension or termination of research by the University's Institutional Animal Care and Use Committee (IACUC), the Institutional Biosafety Committee (IBC), and/or a report of suspected misconduct, and/or reporting to government regulatory agencies. Gross or repeated violations may also be subject to review by the Office of the Vice President for Research and similarly reportable to applicable government regulatory or granting agencies, and may invoke individual disciplinary actions. Disciplinary actions will be guided by the University's Faculty

Manual, Staff Handbook, or student guidelines, contracts or other agreements applicable to the specific situation.

7.0 REFERENCES

Code of Federal Regulations, Title 29, Part 1030 (OSHA), Bloodborne Pathogen Standard.

Saint Louis University Research Compliance, Policy Number RC-006, Occupational Health Program for Laboratory and Animal Research.

POLICIES RESCINDED

None

APPROVAL SIGNATURES

This policy was approved by:

Raymond C. Tait, Ph.D.

Vice President for Research Administration

Saint Louis University

VERSION HISTORY		
FFECTIVE DATE	VERSION NUMBER	MODIFICATION
02JAN2013	1.0	New Document