Biological Agent Reference Sheet (BARS)

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BIOLOGICAL AGENT REFERENCE SHEET

Human Immunodeficiency Virus (HIV) in Research and Healthcare settings

CHARACTERISTICS		
Morphology	Family: Retroviridae, Genus: <i>Lentivirus</i> . ssRNA, enveloped icosahedral nucleocapsid, of approximately 100 to 110 nm in diameter. Strains: HIV-1 and HIV-2.	
Growth Conditions	Cell culture	

HEALTH HAZARDS			
Host Range	Humans		
Modes of Transmission	In general, HIV is spread by close sexual contact or parenteral exposure through blood or blood products, including transfusion. Mother-child transmission can occur during pregnancy, delivery or breastfeeding.		
Signs and Symptoms	Non-specific symptoms such as lymphadenopathy, anorexia, chronic diarrhea, weight loss, fever, and fatigue; opportunistic infections and malignant diseases without a known cause for immune deficiency.		
Infectious Dose	Unknown		
Incubation Period	Variable		

MEDICAL PRECAUTIONS / TREATMENT				
Prophylaxis	Post exposure prophylaxis is available.			
Vaccines	None			
Treatment	Antiretroviral agents are available.			
Surveillance	Clinical follow-up and confirmation of diagnosis by serology or viral titers			
Emory Requirements	Report			

LABORATORY HAZARDS		
Laboratory Acquired Infections (LAIs)	Needle stick, contaminated sharp objects, direct contact of non-intact skin or mucous membranes with HIV-infected specimens/tissues.	
Sources	Blood; concentrated virus in a laboratory; visibly bloody fluid; other body fluids (semen, CSF, vaginal); unscreened or inadequately treated blood products.	

SUPPLEMENTAL REFERENCES		
Canadian	http://www.phac-aspc.gc.ca/lab-bio/res/psds-ftss/hiv-vih-	
MSDS	eng.php	
BMBL: 5 th	http://www.cdc.gov/OD/ohs/biosfty/bmbl5/BMBL 5th Edi	
Edition	tion.pdf	
CDC	http://www.edc.cov/UAL/ndfc/hhp/Evp.to_Dlood.ndf	
Guidelines	http://www.cdc.gov/HAI/pdis/bbp/Exp_to_Blood.pdi	

CONTAINMENT REQUIREMENTS		
BSL-2	Work involving clinical specimens and non-culture	
	procedures	
BSL-2+BSL3	In vitra cultura of compatent virus (replication) and	
practices or	<i>In vitro</i> culture of competent virus (replication), and	
BSL3		
ABSL-2	Work with NHPs or other animals inoculated with	
	HIV, and their specimens.	

SPILL PROCEDURES					
Small	Notify others working in the lab. Allow aerosols to settle. Don appropriate PPE. Cover area of the spill with paper towels and apply an EPA registered disinfectant, working from the perimeter towards the center. Allow 30 minutes of contact time before disposal and cleanup of spill materials.				
Large	Contact Emory's Biosafety Officer (404-727-8863), the EHSO Office (404-727-5922), or The Spill Response Team (404-727-2888).				
EXPOSURE PRO	OCEDURES				
Mucous	Flush eyes, mouth or nose	e for 15 minutes at eyewash			
membrane	station.				
Other Exposure	wash area with soap and	water for 15 minutes.			
Reporting	All work incidents (major or minor) must be reported to Occupational Injury Management. Complete an incident report using Self Service through Emory Peoplesoft (https://hrprod9.emory.edu)				
Medical Follow up	<u>7am-4pm (OIM)</u> : EUH (404-686-7941) EUHM (404-686-7106) WW (404-728-6431)	After Hours: OIM NP On Call 404-686-5500 PIC# 50464			
	EUH (404-686-8587) EUHM (404-686-2352)	Office (404-727-8012) Cell (404-275-0963)			
Disinfection	Fresh 2% glutaraldehyde	1% sodium hypochlorite			
Inactivation	Hresh 2% glutaraidenyde, 1% sodium hypochlorite HIV is inactivated by ultraviolet (UV) light, in close proximity; cell-free medium; pH higher or lower than 7.1; temperature higher than 60C for at least 30 min				
Survival Outside Host	Contaminated blood at room temperature for 42 days, and in blood and cerebrospinal fluid from autopsies for up to 11 days.				
PERSONAL PRO	PERSONAL PROTECTIVE EQUIPMENT (PPE)				
Minimum PPE Requirements	At minimum, personnel are required to don gloves, closed toed shoes, lab coat, and appropriate face and eye protection prior to working with <i>HIV</i> . Additional PPE may be required depending on lab specific SOPs.				
Additional Precautions	Extreme care must be taken to avoid spilling and/or splashing infected materials. HIV should be presumed to be in/on all equipment and devices coming in direct contact with infected materials.				