

HBA/IBC MEETING MINUTES
Institutional Biosafety Committee (IBC)
Zoom Meeting

Meeting Minutes

February 06, 2026
1:00 pm – 3:30 pm

ATTENDANCE

Voting Members Present:

	<i>IBC Position</i>	<i>Area or Department</i>
Daniele Provenzano (Zoom)	Chair, Scientist	Bio. & Chem. - Bacterial Genet.
Julie Mustard (Zoom)	Vice-Chair, Scientist	Integrative Bio. & Chem. - Neurosci.
Megan Keniry (Zoom)	Scientist	Integrative Bio. & Chem. – Mamm. Cell Bio.
Dae Joon Kim (Zoom)	Scientist	Medicine & Oncology
HyeongJun Kim (Zoom)	Scientist	Phys. and Astron. Bacterial Chr. dynamics/biophys./biochem.
Robin Choudhury (Zoom)	Scientist	Bio. & Chem. - SEEMS
Subramanian	Scientist	Medicine & Oncology
Dhandayuthapani (Zoom)		
David Laughlin (Zoom)	Community Representative	Not Affiliated
Javier Garcia (Zoom)	BSO, Ex-Officio	Environmental Health, Safety & Risk Management

Voting Members Absent:

(Without Representation)

	<i>IBC Position</i>	<i>Area or Department</i>
Laura Decanini	Community Representative	Not Affiliated
Lynne Depeault	Community Representative	Not Affiliated

Ex-Officio Non-Voting Members Present:

	<i>IBC Position</i>	<i>Area or Department</i>
Amy Mutore (Zoom)	Ex-Officio, Professional Support	Office of Research Compliance
Monica Barrera (Zoom)	Ex-Officio, Professional Support	Office of Research Compliance
Eric Allen (Zoom)	Ex-Officio, Admin Rep	Office of Research Compliance
Cordelia Rasa (Zoom)	Ex-Officio, LAR & BSL3 Director	Ex-Officio, LAR & BSL3 Director
Matthew Moncus (Zoom)	Ex-Officio, EHSRM Director	Ex-Officio, EHSRM Director

Ex-Officio Non-Voting Members Absent:

	<i>IBC Position</i>	<i>Area or Department</i>
None.		

Total Voting Members Present: 9

Guests:

	<i>Capacity</i>
None	

QUORUM

The quorum requirement for the IBC meeting is 6 voting members present and must consist of at least 5 members from UTRGV faculty and 1 unaffiliated member. Upon quorum being assembled, the meeting was called to order by the Chair at 1:51 pm. Including the Chair, 9 voting members were in attendance at the beginning of the meeting. Meeting began at 1:51pm due to waiting for a community member to attend in order to have quorum. Quorum was maintained throughout the entire meeting.

A. WELCOME

The Chair welcomed the Committee.

B. STATEMENT OF CONFIDENTIALITY

The Chair reminded the Committee to hold in confidence the information revealed and/or discussed during the meeting and not disclose the information to any third parties including investigators and research personnel.

C. CONFLICTS OF INTEREST:

The Chair reminded the Committee of their responsibility to declare any conflicts of interest prior to the discussion of any study included as an agenda item. Members were reminded that conflicts of interest include financial (e.g., Member or Member's family hold a financial interest in the research sponsor) and non-financial (e.g. Member is part of a study research team). The Members were polled for any conflicts of interest with the projects being reviewed.

No conflicts were reported.

D. REVIEW AND APPROVAL OF PREVIOUS IBC MEETING MINUTES

1. Review of meeting minutes dated **December 12, 2025.**

- a. A motion was made by Dr. Dae Joon Kim and seconded by Dr. HyeongJun Kim to approve the minutes with corrections.
- b. All were in favor of approval.
- c. Total Voting = 9 Vote: For = 9, Against = 0, Abstained = 0, Recused = 0.

E. ANNUAL REVIEWS

None.

F. NEW IBC PROTOCOLS

1. IBC-25-70

Project Title: *Integrated Evaluation of Novel β -Lactam KRAS Inhibitors and Synergistic Small-Molecule Therapeutics for KRAS-Driven Hepatobiliary and Pancreatic Carcinomas*

Sponsor: ST CECR

Biosafety Level: BSL-2 Plus

Principal Investigator (PI): Vivek Kashyap

Type of Submission: New Protocol

Committee Action: 30-day Approval; Revisions needed to secure approval past 30 days

Total Voting = 9 *Vote: For = 9, Against = 0, Abstained = 0, Recused = 0.*

Summary:

The goal of the project is to evaluate β -lactam-based KRAS inhibitors using a stepwise experimental pipeline that progresses from in vitro cell-based assays to 3D organoid systems and finally to in vivo mouse models

NIH Guidelines Sections:

1. II-A-3, Appendix C-1 - Use of animal cells/cell lines or tissues (e.g., tissue culture research)

Discussion:

The Committee discussed the protocol in detail and determined that the PI would need to make multiple minor revisions to secure approval after 30 days. The Committee reviewed and verified that the protocol specifies all approved laboratory spaces authorized for the proposed activities. All procedures outlined in the protocol were determined to be consistent with established standard laboratory practices and compliant with institutional requirements for work in these designated spaces. PI CVs have been evaluated to verify and certify subject matter expertise.

The following changes are requested from PI:

1. In Box 1, provide a brief description of the KRAS signaling pathway in lay terms to contextualize the rationale and significance of the project.
2. In Box 2, address mouse inoculations as a risk factor and what will be done to mitigate it in Box 3 (briefly describe the sharps handling techniques).
3. At UTRGV, research involving manipulations of oncogenes using CRISPR and Lentivirus vector delivery require BSL-2+ precautions. These are temporary heightened safety measures to be taken when such experimental steps are performed in the research laboratory. Contact Mr. Javier Garcia at EHSRM (copied) to help define these additional precautions and include them in the protocol under "Maximum BSL required for work".

Risks Identified:

The committee determined the study needs to be BSL-2 + due to agents being used that may pose a heightened risk to humans and/or the environment which require added precautions. This includes manipulations of oncogenes using CRISPR and Lentivirus vector delivery that require BSL-2+ precautions.

Motion:

A motion was entered by Dr. Subramanian Dhandayuthapani and seconded by Dr. Dae Joon Kim to grant 30-day approval of IBC-25-70 pending the changes and information requested are satisfactorily addressed by the PI and that the training records are up to date to secure approval past the 30-day period. The motion carried unanimously.

G. ADMINISTRATIVE BUSINESS

1. IBC Administrative Approvals-Policies & Procedures Proposed Wording

- a. Dr. Daniele Provenzano brought up the suggested wording by Mr. Eric Allen that details the administrative approval of protocols process for the committee to review, discuss, and possibly approve to add it to the IBC Policies and Procedures document as proposed.
- b. Dr. Julie Mustard mentioned ensuring that the approval of annual renewals outside of a committee meeting is indeed allowed or they still have to be voted on in a meeting, maybe all together.
 - i. Dr. Daniele Provenzano mentioned most annual renewals will likely be quickly approved and asked if the only change being reported is personnel addition and/or removal, is it truly necessary for the committee to see it.
 - ii. Dr. Mustard pointed out that IBC protocols can not be reviewed via ad-hoc as with HBAs, so she wants to ensure there is nothing mentioned in the NIH guidelines that states the annual reviews would also require approval at a convened meeting.
 1. If those protocols do have to be approved at a meeting, should they be shown on a list the committee views and approves.
 - iii. Mr. Eric Allen mentioned that currently, multiple organizations interpret the current NIH regulations to allow the flexibility of a representative of the IBC to review things in this administrative manner. This allows Dr. Daniele Provenzano

to be involved as Chair and step in to say he approves on behalf of the committee.

1. Mr. Eric Allen mentioned the committee will have the ability to be aware of all actions taken outside of the meetings via a list of approved protocols that can be provided at each meeting. This list will show all the different studies that have been through both administrative review processes to give the committee the option to express thoughts or concerns with any of the administrative approvals.
 2. If this process is approved by the committee and added to the IBC Policies and Procedures document, it will be determined as this committee's process and can be referenced in the event that the NIH should have any questions. It will also be documented within the committee meeting minutes that will also show that everyone on the committee was able to review the process and approve it.
- c. A motion was entered by Dr. Subramanian Dhandayuthapani and seconded by Dr. Dae Joon Kim to add the proposed wording for the administrative approvals to the IBC Policies and Procedures as suggested.
- i. All were in favor of approval.
 - ii. Total Voting = 9 Vote: For = 9, Against = 0, Abstained = 0, Recused = 0.

2. Lab-specific Trainings Document

- a. Mr. Eric Allen edited the lab-specific training document that was created in conjunction with Dr. Daniele Provenzano using his own current lab training form as a template, along with recommendations by Ms. Cordelia Rasa, to include suggestions made by the committee at the last IBC meeting.
- b. Dr. Julie Mustard suggested also adding contact information for the UTRGV police, for UTRGV facilities, and for UTRGV Student Health. She mentioned campus police can respond quicker due to being familiar with the campus buildings and layout.
 - i. Mr. Eric Allen agreed and mentioned he will be adding areas on the form to have that information filled out.
- c. Dr. Julie Mustard also suggested having the emergency contact information posted in the lab where it would be clearly visible and readily available if needed. She mentioned it could be the first or last page of the document that could be detached to be posted on the lab door.
 - i. Dr. Daniele Provenzano recalled having a similar document containing emergency contact information for UTRGV Police, UTRGV Facilities, and the PI information and asked Mr. Javier Garcia if EHSRM still provides that document. Mr. Javier Garcia said they currently have a door posting with the contact information for the PI in the lab and the number for UTRGV Police. He mentioned he can use Dr. Daniele Provenzano's emergency contact document to make note of it and create something similar through EHSRM.
 - ii. Dr. Daniele Provenzano said it would be worth working on a document that can be laminated and posted that would be specific to the PIs campus location. Dr. Julie Mustard agreed.

- d. Mr. Eric Allen suggested adding an area on the document where lab personnel can sign acknowledging they are aware of where the emergency contact information is in the lab to document their acknowledgement.
 - i. Dr. Julie Mustard agreed, but also mentioned the importance of having the unique contact information for the specific lab personnel is in that contains the PI information as well as the room number and building because often times people may forget details like that in the case of an emergency.
 - ii. Dr. Julie Mustard mentioned having all the important emergency contact information should be, as Dr. Daniele Provenzano mentioned, a laminated document that would be separate from the lab-specific training document, and mentioned it should be posted where it can be easily seen while in the lab.
 - 1. Dr. Daniele Provenzano agreed with this and also agreed with Mr. Eric Allen's suggestion of also adding an area to the lab-specific training document for adding in emergency contact information for the lab.
 - 2. Dr. Daniele Provenzano will be sending the emergency contact document he has for his lab to Mr. Javier Garcia so a similar template can be created and used for lab, and Mr. Eric Allen will follow up with Mr. Javier Garcia after a template is created.
- e. Dr. Julie Mustard mentioned she contains a document within a binder kept in the lab which also includes the emergency contact information for every person currently working in her lab. This is so that if an emergency happens to one person, others know to reference that binder to know who to inform for that person. She mentioned this should also be included in the lab-specific document template.
 - i. Dr. Daniele Provenzano mentioned that his lab personnel have a group chat with him with which they are always in contact with each other, so if an emergency were to happen with one person, the others can contact him and he can contact the emergency contact.
 - ii. Dr. Julie Mustard mentioned the emergency contact information for each person in the lab should be kept in the lab and not necessarily be kept in each person's individual lab notebook so it can be available to everyone and not just the PI.
 - 1. Dr. Daniele Provenzano mentioned that he, as the PI, has the emergency contact information for each of his lab personnel and he can quickly contact the emergency contacts in the event of an emergency. He mentioned it is more important for the PI to have the emergency contact information rather than each person having each other's contact information.
 - 2. Dr. Julie Mustard mentioned an emergency could occur while the PI is in class, or is driving, or somehow unknowingly has their phone turned off and therefore may not be made aware of an emergency. So, having the emergency contacts available to everyone in the lab could ensure that someone is contacted in the even of an emergency.
 - a. Dr. Julie Mustard noted that emergency contacts will often know critical medical information about the person that may be needed in the case there is need for hospitalization.

- iii. Dr. Daniele Provenzano suggested reviewing the document longer, to add any other edits the committee may suggest. Then the document can be brought up to the committee for a vote. He mentioned he will work with Mr. Javier Garcia on the laminated document, and also asked Dr. Julie Mustard to formalize in a paragraph how the committee can implement her suggestions on the availability of the emergency contact information.
 1. Dr. Julie Mustard mentioned wanting to know what would happen to the lab document once it is signed by all personnel, to make sure they all have access to it.
 2. Ms. Cordelia Rasa suggested the document could also be attached to the tick@lab protocol at the file level which would then make it available for them to access at anytime from anywhere they can access tick@lab.
 3. Mr. Eric Allen mentioned having access to emergency contact information be a lab-specific decision noting that it may require the consent of each lab member to agree to have their emergency contact information be made available to everyone within the lab they are a part of.

3. ABSA International 4th Biosecurity Virtual Symposium

- a. Dr. Daniele Provenzano informed the committee about the ABSA Virtual Symposium that will be happening in May. He asked committee members to let Ms. Amy Mutore or Ms. Monica Barrera know if they wish to attend.
 - i. Ms. Monica Barrera mentioned the cost of attendance will be covered by the ORC.
 - ii. Dr. Julie Mustard asked that the link to the website and flier be sent to the committee.
- b. Ms. Cordelia Rasa mentioned ABSA may also have trainings/webinars for plant and insect handling, focusing on biosafety and regulatory compliance that may be of interest as well.
- c. Dr. Daniele Provenzano mentioned the NIH has listening sessions by region as well and he recently participated in one.
- d. Ms. Cordelia Rasa asked if IBC members are members of ABSA. Ms. Monica Barrera said a membership is currently not active for the committee or the institution, but that one can be paid for if it is needed.

H. OTHER BUSINESS

1. EHSRM Report:

- a. Mr. Matthew Moncus mentioned he liked the direction the lab safety is going. He noted that having standardized lab safety protocols is something he thinks will be very beneficial.

- b. Mr. Matthew Moncus mentioned EHSRM has door signs and door postings for emergency contacts, but many do need an updated format. It will be a project they will want to get going in the near future.
2. **LAR Report:**
- a. Ms. Cordelia Rasa mentioned there are BSL-3 activities now in the Edinburg labs with vertebrate animals.
3. **PAM Report:**
- a. Dr. Torres-Avila was not present at the meeting, but she asked Ms. Monica Barrera to report that she is currently conducting PAM for IBC protocols and she'll report any finding or important information to the committee that may arise.

I. ADJOURNMENT

The meeting was adjourned at 3:11 pm.

----APPROVAL OF MINUTES ----

These minutes were approved by the IBC on March 6, 2026.