The University of Texas Rio Grande Valley

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

Meeting Minutes

November 14, 2025
1:00 pm – 3:30 pm

ATTENDANCE

Voting Members Present:

	IBC Position	*Area or Department*
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
Lynne Depeault (Zoom)	Community Representative	Not Affiliated
HyeongJun Kim (Zoom)	Scientist	Phys. and Astron. Bacterial Chr. dynamics/biophys./biochem.
Robin Choudhury (Zoom)	Scientist	Bio. & Chem. - SEEMS
Subramanian Dhandayuthapani (Zoom)	Scientist	Medicine & Oncology

Voting Members Absent:
(Without Representation)

	IBC Position	*Area or Department*
Laura Decanini	Community Representative	Not Affiliated

Ex-Officio Non-Voting Members Present:

	IBC Position	*Area or Department*
Amy Mutore (Zoom)	Ex-Officio, Professional Support	Office of Research Compliance
Eric Allen (Zoom)	Ex-Officio, Admin Rep	Office of Research Compliance
Javier Garcia (Zoom)	Ex-Officio, EHSRM	Ex-Officio, EHSRM

Ex-Officio Non-Voting Members Absent:

	IBC Position	*Area or Department*
Monica Barrera	Ex-Officio, Professional Support	Office of Research Compliance
Cordelia Rasa	Ex-Officio, LAR & BSL3 Director	Ex-Officio, LAR & BSL3 Director

	Ex-Officio, EHSRM Director
Matthew Moncus (Zoom)	Ex-Officio, EHSRM Director

Total Voting Members Present: 8

Guests:

	Capacity
None	

QUORUM
The quorum requirement for the IBC meeting is 5 voting members present and must consist of at least 4 members from UTRGV faculty and 1 unaffiliated member. Upon quorum being assembled, the meeting was called to order by the Chair at 1:08 pm. Including the Chair, 8 voting members were in attendance at the beginning of the meeting. Dr. Choudhury logged on to the meeting at 1:30pm. Ms. Lynne Depeault left the meeting at 2:26pm. 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 APROVAL OF PREVIOUS IBC MEETING MINUTES

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

    a. A motion was made by Ms. Lynne Depeault and seconded by Dr. Subramanian Dhandayuthapani to approve the minutes with corrections.

b. All were in favor of approval.
c. Total Voting = 7 Vote: For = 7, Against = 0, Abstained = 0, Recused = 0.
Dr. Robin Choudhury was not present during the review of the minutes and did not vote.

2. Review of meeting minutes dated **October 24, 2025.**

a. A motion was made by Dr. Julie Mustard and seconded by Dr. Dae Joon Kim to approve the minutes with corrections.
b. All were in favor of approval.
c. Total Voting = 7 Vote: For = 7, Against = 0, Abstained = 0, Recused = 0.
Dr. Robin Choudhury was not present during the review of the minutes and did not vote.

E. ANNUAL REVIEWS

1. IBC-23-91 (2019-006-IBC & 2019-009-HBA)

Project Title: *Laboratory opossum iPSC lines for biomedical research*
Sponsor: NIH/OD
Biosafety Level: BSL-2

Principal Investigator:	Satish Kumar
Type of Submission:	Annual Review
Committee Action:	Approved
Total Voting = 6	Vote: For = 6, Against = 0, Abstained = 0, Recused = 0. Dr. Robin Choudhury was not present during the meeting for the review of this protocol and Dr. Dae Kim briefly stepped out, both did not participate during voting for this protocol.

Incidents:
None.

NIH Guidelines Sections:

1. II-A-3, Appendix C-1 - Use of animal cells/cell lines or tissues (e.g. tissue culture research)
2. II-A-3 - Use of human cells/cell lines or tissues (e.g., human blood, 293 cell lines, CSF)
3. III-D-3, III-E-1- Use of virus or viruses
4. III-E, III-F - Generation or use of cDNA/genomic libraries
5. III-E, III-F - Cloning and vector construction in bacteria and yeasts
6. III-F - Use of recombinant or synthetic nucleic acid molecules for detection (e.g., probes)
7. III-E, III-F - Expression of recombinant or synthetic nucleic acid molecules in cultured cells

Discussion:
There have been no changes to the procedures of the protocol. 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.

Motion:
A motion was entered by Ms. Lynne Depeault and seconded by Dr. HyeongJun Kim to grant approval of IBC-23-91 (2019-006-IBC & 2019-009-HBA) pending that the training records are up to date. The motion carried unanimously.

2. IBC-23-86 (2019-005-IBC & 2019-007-HBA)
Project Title: *Protein tyrosine phosphatases in cancer, DNA damage, and metabolism*
Sponsor: N/A
Biosafety Level: BSL-2

Principal Investigator:	Dae Joon Kim
Type of Submission:	Annual Review
Committee Action:	Approved
Total Voting = 7	Vote: For = 6, Against = 0, Abstained = 0, Recused = 1. Dr. Dae Joon Kim recused himself from voting due to being the PI on this protocol.

Incidents:
None.

NIH Guidelines Sections:
1. II-A-3, Appendix C-1 - Use of animal cells/cell lines or tissues (e.g. tissue culture research)
2. II-A-3 - Use of human cells/cell lines or tissues (e.g., human blood, 293 cell lines, CSF)
3. III-D-3, III-E-1- Use of virus or viruses
4. III-E, III-F - Cloning and vector construction in bacteria and yeasts
5. III-F - Use of recombinant or synthetic nucleic acid molecules for detection (e.g., probes)
6. III-E, III-F - Expression of recombinant or synthetic nucleic acid molecules in cultured cells
7. III-D-4 - Administration of recombinant or synthetic nucleic acid molecules into animals (e.g., transformed cells, vectors)
8. III-E-3 - Experiments involving transgenic/knockout animals requiring ABSL-1 containment

Discussion:
There have been no changes to the procedures of the protocol. 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.

Motion:

A motion was entered by Ms. Lynne Depeault and seconded by Dr. Julie Mustard to grant approval of IBC-23-86 (2019-005-IBC & 2019-007-HBA) pending that the training records are up to date. The motion carried unanimously.

3. IBC-25-01 (2020-006-IBC & 2020-009-HBA)
Project Title: *Transposase-Accessible Chromatin Sequencing (ATAC-Seq) of live cells*
Sponsor: N/A
Biosafety Level: BSL-2

Principal Investigator:	Satish Kumar
Type of Submission:	Annual Review
Committee Action:	Approved
Total Voting = 8	Vote: For = 8, Against = 0, Abstained = 0, Recused = 0.

Incidents:
None.

NIH Guidelines Sections:
1. II-A-3 - Use of human cells/cell lines or tissues (e.g., human blood, 293 cell lines, CSF)
2. III-E, III-F - Generation or use of cDNA/genomic libraries
3. III-E, III-F - Cloning and vector construction in bacteria and yeasts
4. III-E, III-F - Expression of recombinant or synthetic nucleic acid molecules in cultured cells

Discussion:
There have been no changes to the procedures of the protocol. 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.

Motion:
A motion was entered by Dr. Megan Keniry and seconded Dr. Subramanian Dhandayuthapani to grant approval of IBC-25-01 (2020-006-IBC & 2020-009-HBA) pending that the training records are up to date. The motion carried unanimously.

4. IBC-23-87 (2021-004-IBC & 2021-012-HBA)
Project Title: *MUC13 Mucin in Colorectal cancer health disparity*
Sponsor: N/A
Biosafety Level: BSL-2

Principal Investigator:	Subhash Chauhan
Type of Submission:	Annual Review
Committee Action:	Approved
Total Voting = 8	Vote: For = 8, Against = 0, Abstained = 0, Recused = 0.

Incidents:
None.

NIH Guidelines Sections:
1. II-A-3, Appendix C-1 - Use of animal cells/cell lines or tissues (e.g., tissue culture research)
2. II-A-3 - Use of human cells/cell lines or tissues (e.g., human blood, 293 cell lines, CSF)
3. III-D-1, 2 - Use of or the cloning genes from, or into a Risk Group 2, 3, 4 or restricted agent
4. III-E, III-F - Cloning and vector construction in bacteria and yeasts
5. III-E, III-F - Expression of recombinant or synthetic nucleic acid molecules in cultured cells
6. III-D-4 - Administration of recombinant or synthetic nucleic acid molecules into animals (e.g., transformed cells, vectors)

Discussion:
There have been no changes to the procedures of the protocol. 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.

Motion:
A motion was entered by Dr. HyeongJun Kim and seconded Ms. Lynne Depeault to grant approval of IBC-23-87 (2021-004-IBC & 2021-012-HBA) pending that the training records are up to date. The motion carried unanimously.

5. IBC-23-71 (2018-005-IBC)
Project Title: R*ecombinant DNA preparations for genes that encode for DNA-binding proteins*
Sponsor: N/A
Biosafety Level: BSL-1

Principal Investigator:	HyeongJun Kim
Type of Submission:	Annual Review
Committee Action:	Approved
Total Voting = 7	Vote: For = 6, Against = 0, Abstained = 0, Recused = 1. Dr. HyeongJun Kim recused himself from voting and placed in a waiting room due to being the PI on this protocol.

Incidents:
None.

NIH Guidelines Sections:
1. III-E, III-F - Cloning and vector construction in bacteria and yeasts
2. III-E, III-F - Expression of recombinant or synthetic nucleic acid molecules in cultured cells

Discussion:

There have been no changes to the procedures of the protocol. 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.

Motion:
A motion was entered by Dr. Julie Mustard and seconded Dr. Subramanian Dhandayuthapani to grant approval of IBC-23-17 (2022-013-HBA) pending that the training records are up to date. The motion carried unanimously.

F. 4-YEAR RENEWALS

1. IBC-25-68 (2020-005-IBC)

Project Title: *Mutational Mapping of the GPR119 Ligand Binding Site; Regulation of Steroid Binding to Steroid Receptors*
Sponsor: N/A
Biosafety Level: BSL-2

Principal Investigator (PI):	Evangelia Kotsikorou
Type of Submission:	4-year Renewal
Committee Action:	Approved
Total Voting = 7	Vote: For = 7, Against = 0, Abstained = 0, Recused = 0. Dr. HyeongJun Kim was still in the waiting room and was not present during the review of this protocol so he did not participate in the voting.

Summary:
The goal of the project is to compare the ability of mutant clones to induce cAMP accumulation to the activity of the wild-type sequence. In a second project, the expression activity of mutant clones will be compared to the expression activity of the wild-type gene sequence.

NIH Guidelines Sections:
5. II-A-3, Appendix C-1 - Use of animal cells/cell lines or tissues (e.g., tissue culture research)
6. II-A-3 - Use of human cells/cell lines or tissues (e.g., human blood, 293 cell lines, CSF)
7. III-E, III-F - Cloning and vector construction in bacteria and yeasts
8. III-E, III-F - Expression of recombinant or synthetic nucleic acid molecules in cultured cells

Discussion:
The committee determined there were no significant changes made to the protocol. 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.

Risks Identified:
All risk falls under BSL-2 guidelines and all researchers are trained in BSL-2 safety precautions by UTRGV Health and Safety. The second phase of the work will employ established human cancer or immortalized cell lines. The risk associated with using these samples is very low as these samples have been tested by American Type Tissue Culture for known human pathogens and are widely studied with no issues.

Motion:
A motion was entered by Dr. Julie Mustard and seconded by Ms. Lynne Depeault to grant approval of IBC-25-68 (2020-005-IBC) pending that the training records are up to date. The motion carried unanimously.

G. ADMINISTRATIVE BUSINESS

1. **Protocol Annual Review Approval Discussion**
    a. Dr. Daniele Provenzano brought up the question on the approval of annual renewals that only involved minor personnel changes, and whether or not it could be an administrative approval.
        i. He suggested perhaps an administrative approval batch section could be added to the agenda and the committee give final approval. This could be tricky if there was a large number of new personnel added to an annual renewal.
        ii. Dr. Julie Mustard suggested allowing whoever is giving administrative approval to put the stamp of approval on protocols involving only minor personnel changes, but put red flags on things like a large addition of personnel, or a PI that has not completed their trainings, and other similar issues.
        iii. It was suggested that these protocols could be sent to Dr. Daniele Provenzano for pre-review to ensure all is in order.
            1. Dr. Provenzano will discuss this with Mr. Eric Allen to determine how to incorporate him pre-reviewing protocols with minor personnel additions/removals into the IBC policies and procedures document.
        iv. Dr. Daniele Provenzano noted that the IBC policies and procedures document currently uploaded on the IBC website still contains the word “draft” at the footnote section. Ms. Amy Mutore and Ms. Monica Barrera will work on uploading the edited document, removing “draft” from the footnote.
            1. The IBC meeting minutes for the months of August and September need to be uploaded as well to the IBC site.
2. **Discussion on Protocol Amendments**
    a. Dr. Daniele Provenzano brought up for discussion the process of amendment submissions on tick@lab. Currently, PIs submit personnel amendments but will also submit minor changes to their protocols in the middle of the annual review period. He inquired on whether it was possible to have the amendment become the annual review so the same protocol does not have to be review again in the next six months.

i. Ms. Amy Mutore mentioned this is not possible due to how the system is set. It currently automatically puts protocols for annual review according to the dates the protocol was submitted following a one-year timeline.
ii. Mr. Eric Allen mentioned the Office of Research Compliance can inquire if the system is able to be set up to where the annual renewal of a protocol starts from the last change submitted instead of the automatic yearly date, but he's not sure the system is capable of doing that.
iii. Dr. Julie Mustard asked if there was anything within the NIH regulations that would prohibit the review process to be this way and Dr. Daniele Provenzano said there currently is not.
iv. Mr. Eric Allen noted that a process like this could get complicated in the case where a PI submits multiple amendments within a year, especially for addition of personnel.
    1. Ms. Amy Mutore personnel-only amendments are currently approved by her or MS. Monica Barrera.
v. Mr. Eric Allen mentioned he would look into this suggestion, as well as the suggestion the approval of annual reviews, to see what e possibilities could be.

b. Mr. Eric Allen circled back to instance where PIs add a large amount of personnel to their protocols. He and Dr. Daniele Provenzano previously spoke about establishing a type of lab-wide procedures document that each PI would create for their specific lab. Could this be a way to hold investigators responsible for the safety of personnel in their labs?
    i. Dr. Daniel Provenzano agreed and mentioned it would involve laboratory-specific training or the Standard Operating Procedure (SOP) for the investigator's specific laboratory project. He mentioned most PIs already have something similar in place, but would like to find a way to formalize the process.
        1. He mentioned creating a template that PIs could use and their personnel can sign to agree. Ms. Amy Mutore mentioned a template can be uploaded on tick@lab for the PI to fill out that would stay on the system and could be copied over when renewing a protocol.
    ii. Dr. Julie Mustard mentioned that PIs should also have a sheet that details the work procedures in their lab that personnel could take with them to the doctor in case an incident happened that involved necessary medical evaluation. This would give physicians a better idea of what to do.
        1. Mr. Javier Garcia mentioned ongoing effort to get the Occupational Health Clinic to oversee high-risk exposures but nothing has been solidified yet. This would streamline the process on what to do in a high-risk exposure situation.
            a. Mr. Eric Allen mentioned Ms. Glorimar Colón will be having a meeting with the dean that oversees the Occupational Health Program on ways the program can be improved, and these safety concerns can be brought up as well.

3. **CITI and EHSRM Trainings**
    a. Ms. Amy Mutore asked the committee about the EHSRM and CITI trainings requirements. She understood that all trainings, EHSRM and CITI, would be required

only every 4-year renewal of the protocol, while Ms. Monica Barrera understood that it was only the EHSRM lab safety training that would be required every 4-year protocol renewal. She brought the question up to the committee to revisit what had been previously discussed.

i. Dr. Daniele Provenzano asked Mr. Javier Garcia if he could contact people at the state level to find out if they have any requirements regarding these training modules. Mr. Garcia said they will most likely say it is up to our institution what intervals we would like to set for training renewals.
    1. Ms. Amy Mutore mentioned that Ms. Cordelia Rasa reached out to personnel at the state level and that they also mentioned that the EHSRM lab safety training interval requirements for renewal could be up to our institution, but the question is more for the CITI trainings.
    2. Dr. Daniele Provenzano mentioned the current intervals set for the CITI trainings are ok because those trainings are not so bad, but the lab safety training would be good as a one-and-done type of training due to it's length.

ii. Dr. Julie Mustard mentioned that the EHSRM lab safety training replaced the institution Blackboard training that students used to take one time, and asked if there is currently an institution policy on how this training should be taken and renewed. She was under the impression that it was a one-and-done training.
    1. Dr. Daniele Provenzano mentioned this is a topic that should be handed to EHSRM and to compliance to determine training intervals because he does not feel comfortable making that decision. Dr. Julie Mustard agreed and said we should go with whatever the UTRGV policy is for the trainings, she would support having the requirement be a one-and-done requirement.
    2. Ms. Amy Mutore mentioned that in the previous meeting the EHSRM lab safety training was discussed, Mr. Matthew Moncus said the training could be done just once or every four years, whatever the committee felt was best unless Mr. Javier Garcia knew of an existing UTRGV policy. He said there was no policy in place and that they would have been implementing it from the beginning if there was.
        a. Dr. Julie Mustard mentioned there had to be some sort of a policy that existed. Mr. Eric Allen proposed that he and Mr. Javier Garcia could look into it to make sure there was no policy already in place and work to see what other universities are doing. Mr. Javier Garcia mentioned that this training is currently not being offered in all UT system institutions, UTRGV is one of the first to be using the learning platform.

iii. Mr. Javier Garcia mentioned the question on the EHSRM lab safety training interval would need to go through compliance to ensure everyone is on the same page. UT Systems began offering this training with the idea that it would get all institutions within UT Systems on the same page with safety trainings. These trainings are offered to keep in mind the litigation associated with laboratory accidents.

1. Mr. Eric Allen said he would look into this and have more information for the committee at the next meeting to get the committee's feedback. He mentioned this could help incentivize PIs to provide their lab-specific training and they could be covered for 10 years, 15 years, or whatever the committee comes up with, and if they don't have it then they must complete the training every 4 years. Dr. Daniele Provenzano and Mr. Javier Garcia agreed this could be a possibility.

H. OTHER BUSINESS

1. **EHSRM Report:**
   - **a. None.**

2. **LAR Report:**
   - **a. None.**

I. ADJOURNMENT

The meeting was adjourned at 3:11 pm.

----APPROVAL OF MINUTES ----

These minutes were approved by the IBC on December 12, 2025.