

Department of Radiology: Clinical Research Division Standard Operating Procedure		
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Revision No.: 00		
Effective Date: June 1 st , 2020		
Originator: Norman Butler, Dr James Pilla		
Director, Research Operations:		Regulatory Approval:

1.0 PURPOSE

This document outlines the procedures and guidelines regarding the reopening of the CAMRIS Facilities in compliance with the COVID-19 Phase I Resurgence Plan outlined by the Office of the Executive Vice Dean.

All prior existing LAIF policies dealing with cleaning, trash, sharps, and biologics remain unchanged by this SOP. This document stands as an extension of existing policy and procedure for using LAIF Facilities.

2.0 SCOPE

This SOP applies to all Researchers, Principal Investigators and respective research staff entering/operating in the LAIF Facilities both Smilow and HUP during the COVID-19 Research Resurgence Plan. It outlines policies/procedures surrounding but not limited to:

1. Social Distancing and wearing proper PPE
2. Staggering of schedules
3. Allowance of adequate downtime between studies
4. Cleaning/wipe down of contact surfaces
5. Clutter avoidance and removal

3.0 RESPONSIBILITIES

- 3.1 All System Operators, Technologists, and Investigators in LAIF areas will have completed the EHRS "Penn COVID-19 Training for Lab Researchers" prior to entering facility.
- 3.2 Investigators will be expected to follow all policies and procedures outlined in this document. Failure to do so may result in termination of your access.
- 3.3 Standard droplet protection masks are to be properly worn at all times while in the facility.
- 3.4 Investigators (unless arranged through MR Tech) schedule time on PBR calendar and must provide a 1-hour buffer in place prior to their session. This is accomplished by leaving an open slot prior to Investigator's session.

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- 3.5 Investigators are responsible for maintaining the 1-hour buffer between studies. Studies must end 1-hour before the next scheduled study regardless of study status to avoid violating the 1-hour buffer.
- 3.6 Investigators schedule prep room if needed and follow all prep room policy/procedures set by SAIF.
- 3.7 Investigators need to provide current and viable contact information on calendar for updates about delays and issues.
- 3.8 Investigators need to bring disinfectant for wipe down of contact surfaces and perform post session clean-up.
- 3.9 Investigator's provide their own PPE.
- 3.10 Investigators will set up and break down dividers needed for procedure. If LAIF MR Tech is part of the study the MR Tech will take of this procedure. Proper placement should be discussed with LAIF prior to session

4.0 POLICY/PROCEDURE

- 4.1 Social spacing distance of 6' or greater is to be maintained
- 4.2 Proper level PPE is to be worn at all times (Masks at all times)
- 4.3 Projects must minimize the number of people present during imaging session.
 - 4.3.1 Groups of more than 2 must have plans for PPE to minimize possible exposure and limiting time of close social distance.
 - 4.3.1.1 Group should use face shields in addition to masks during work necessitating close quarters.
 - 4.3.1.2 Workflow and planning that allows for quick placement and positioning of the animal in the scanner.
- 4.4 In SMILOW dividers must be in place to operate scanner.
- 4.5 One operator permitted at the scanner console. Grouping at the console is to be avoided.
- 4.6 In addition to post session MR system wipe down the user will also wipe down of contact and touch surfaces in and outside scanner including:

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- 4.6.1 MRI Room Entry door handles
- 4.6.2 Operator keyboard
- 4.6.3 Operator Desk
- 4.6.4 Operator seat and armrests (all chairs used during session)
- 4.6.5 Contact edges of dividers surrounding 3T MRI scanner control area

4.7 Dividers should be folded and placed in proper place for storage.

4.8 No Investigator equipment should remain in MRI scanner area. Clutter and additional “stuff” should be taken back with Investigative group

4.9 All current policy and procedure dealing with waste and sharps are to be followed.

4.10 Staggered times for scheduling and cleaning must be followed

4.11 Scheduled time sessions are to be placed on PBR Calendar system and included buffer time left open.

4.11.1 Delay information and updates must be relayed to following Investigator

4.11.2 Time slots are to be respected. Over run or delay cannot cause issue with other scheduled sessions. Buffer time is not placed for long delays or over runs. If used as such they will be billed to the Investigative group.

5.0 References and Attachments

Guidelines for essential research and a brief survey - Office of the Executive Vice Dean and Chief Scientific Officer 05/11/2020

PENN EHRS – “Penn COVID-19 Training for Lab Researchers” EHRS COVID-19 Guidance

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