Research Resumption Application

This form must be filled out by PIs who are requesting authorization to restart specific research activities. PIs must abide by the on-campus research directives and the directives on Preventing the Spread of COVID-19 at McGill posted at [www.mcgill.ca/coronavirus](http://www.mcgill.ca/coronavirus)

Please also refer to [the specific ramp-up procedures and workflow for approval](https://www.mcgill.ca/medresearch/about/special-notices-covid-19-research-updates) of the Faculty of Medicine. Please adhere to the sections and formatting of the present document as you will be required to submit its final version via an online form to McGill Emergency Operations Committee.

Section 1

1. Principal Investigator Name:
2. PI McGill ID#:
3. Name of alternate emergency contact for research activities:
4. McGill ID# of that person:
5. Field of research and nature of the research:
6. Reasons why it is vital to restart part or all of on-campus research activities without delay (bullet list):
7. Description of the activities that are requested to be performed on-campus and the ones that will continue to be performed remotely (bullet list):
8. Research buildings for which access is requested
9. Schedule and description of operation
10. Laboratory room numbers for which access by trainees/personnel is requested

Section 2

Research Personnel

For each person for whom access is requested, please provide Name, ID, Schedule of access, and rooms to be accessed.

1. Name
2. McGill ID
3. Time during which access is requested (day of week; in and out times)
4. Room number(s) to be accessed

(MULTIPLE FIELDS AVAILABLE FOR LIST)

Section 3

Other details

1. Maximum number of people working at the same time and approximate size of lab
2. Additional common rooms that need to be accessed by trainees/personnel during this period (including core facilities)
3. Have you coordinated access to shared facilities with facility managers? Please explain.
4. Will the proposed work allow to maintain the two-meter distance for all work areas?

Yes No

1. Describe the plan to ensure that the two-meter distance is maintained:
2. For research for which two-meter rule cannot be respected, which room does it involve?
3. Detailed safety plan for the case when the two-meter distance cannot be respected
4. PPE may be required due to the type of research performed. Regardless of research type, lab members are encouraged to wear PPE while on premises when in shared spaces, but physical distancing and hand washing are paramount. If required, specify type of PPE required for research activities (N/A if none is needed).
5. Estimate of monthly total need for PPE.
6. Describe the steps, duration and consequences of a potential sudden ramp down of the proposed project.
7. List of frequently touched surfaces in the labs and strategies to clean them
8. List of projects already allowed under research exemption and impact on the additional activities requested in the present application
9. Explain how you have coordinated scheduling with others on your floor/wing to limit numbers of people in corridors/washrooms.
10. Please confirm that your chair/unit head has reviewed and approved of this plan.

Chair has approved Chair has not yet approved