

# Application: 0000000060

MAX COLLER - max.coller@wisc.edu  
Research Reboot

## Summary

**ID:** 0000000060  
**Last submitted:** May 28 2020 07:41 AM (CDT)

## Research Reboot Data Form

**Completed** - May 28 2020

## Research Reboot Data Form Part 1 - About The Researcher

One request should be completed for all activities led by a PI. Requests can be updated as phases change or as research activities change.

## About the Researcher:

### Q1) PI/Faculty member making this request:

First Name	Bucky
Last Name	Badger
NetID	bbadger
Campus Email Address	<a href="mailto:bbadger@wisc.edu">bbadger@wisc.edu</a>
Title	Professor
Department/Center/Unit Affiliation	All of them

**Q2) In which of the following Schools/Colleges does the PI have appointments? Check all that apply:**

Business	<input checked="" type="checkbox"/>
CALS	<input checked="" type="checkbox"/>
Computer, Data and Information Sciences	<input type="checkbox"/>
Education	<input type="checkbox"/>
Engineering	<input type="checkbox"/>
Extension	<input type="checkbox"/>
Human Ecology	<input type="checkbox"/>
L&S	<input type="checkbox"/>
Law	<input type="checkbox"/>
Nelson Institute	<input type="checkbox"/>
Nursing	<input type="checkbox"/>
OVCRGE Center	<input checked="" type="checkbox"/>
Pharmacy	<input type="checkbox"/>
SMPH	<input type="checkbox"/>
Vet Med	<input type="checkbox"/>

**Q2.1) In which of the OVCRGE centers does the PI have appointments? Check all that apply:**

AMERICAN FAMILY INSURANCE DATA SCIENCE INSTITUTE	<input checked="" type="checkbox"/>
ARBORETUM	<input checked="" type="checkbox"/>
AQUATIC SCIENCES CENTER	<input checked="" type="checkbox"/>
BIOTECHNOLOGY CENTER	<input checked="" type="checkbox"/>
BIOTRON	<input checked="" type="checkbox"/>
CENTER FOR GENOMIC SCIENCE INNOVATION	<input checked="" type="checkbox"/>
DISCOVERY TO PRODUCT	<input checked="" type="checkbox"/>
INSTITUTE ON AGING	<input checked="" type="checkbox"/>
INSTITUTE FOR MOLECULAR VIROLOGY	<input checked="" type="checkbox"/>
LABORATORY OF CELL AND MOLECULAR BIOLOGY	<input checked="" type="checkbox"/>
PHYSICAL SCIENCES LABORATORY	<input checked="" type="checkbox"/>
PRIMATE RESEARCH CENTER	<input checked="" type="checkbox"/>
RESEARCH ANIMAL RESOURCES AND COMPLIANCE	<input checked="" type="checkbox"/>
SPACE SCIENCE AND ENGINEERING CENTER	<input checked="" type="checkbox"/>
STEM CELL & REGENERATIVE MEDICINE CENTER	<input checked="" type="checkbox"/>
WAISMAN CENTER	<input checked="" type="checkbox"/>
WISCONSIN ENERGY INSTITUTE	<input checked="" type="checkbox"/>
WISCONSIN ICECUBE PARTICLE ASTROPHYSICS CENTER	<input checked="" type="checkbox"/>
WISCONSIN INSTITUTE FOR DISCOVERY	<input checked="" type="checkbox"/>

**Q3) Please provide contact information for the department chair, research center director, SMPH division chief, or other person who would need to review activities for the on-site research proposed to re-start.**

**In the next task, after submitting this current form, you will be given instructions on the process to use to add these people as collaborators to your Research Reboot proposal.**

	Dept Chair	Center Director	SMPH Division Chief/Other
First Name	Steve		
Last Name	Ackerman		
Campus Email	<a href="mailto:steven.ackerman@wisc.edu">steven.ackerman@wisc.edu</a>		
Department/Unit Name	VCRGE		

## **Add Collaborators**

**Completed** - May 28 2020

### **Form for "Add Collaborators"**

**Add each person listed in Q3 of the previous section (Department Chair, Center Director, SMPH Division Chief/Other) as a collaborator to this proposal.**

**To complete this activity, click on the "< Back To Application" link at the top of the left-hand Task pane on this page, then use the Add Collaborator button on the bottom left of the screen to add the person or people you listed in Q3.**

**When you have completed this activity, mark this section as complete and move on to the next section About The Research in consultation with your collaborator(s).**

## **Research Reboot Data Form Part 2**

**Completed** - May 28 2020

### **Research Reboot Data Form Part 2 - About The Research**

One request should be completed for all activities led by a PI. Requests can be updated as phases change or as research activities change.

# About The Research:

## Q4) Is the PI proposing to continue and/or restart:

a) experiments or data collection in a laboratory setting?	Yes
b) data collection in an organizational setting, such as a clinic or school?	Yes
c) data collection elsewhere off campus or in the community?	Yes
d) experiments or data collection using a Research Core Facility?	Yes
e) use of restricted data, a data cold room, or other restricted data center?	Yes
f) use of music, visual, or performing art studio space (single researcher)?	Yes
g) use of music, visual, or performing art shared research spaces (multiple researchers)?	Yes
h) use of books, journals, or other physical materials held in a library, archive, or museum (including Wisconsin Historical Society)?	Yes
i) basic lab maintenance? (e.g. liquid nitrogen refills, animal care)	Yes
j) use of facilities in a way other than those listed?	Yes

## Q4.1) Please describe how the activity would use research facilities:

We'll be doing research

**Q5) Do the requested activities include continuation of research previously approved for on-site activities during the campus shutdown (Phase 0)?**

Yes

**Q6) Briefly describe the proposed research activities and why they must be done on-site:**

We'll be doing the research. All of the research.

**Q7) Are human subjects involved in the research activities being proposed?**

Yes

**Q7.1) Do the activities involve face-to-face data collection or other face-to-face contact?**

Yes

**Q7.1.1 Please describe the study population, whether this population is known to be particularly at risk for COVID-19, potential risks related to the research, and the potential for any direct and meaningful benefits to individual participants.**

We'll be studying people by asking them questions.

**Q8) Are animal subjects used in this research?**

Yes

**Q8.1) Please do not order animals under the approved IACUC protocol until the research has been approved for Phase 1 activities. Upon approval, please notify the animal care facility that the research has been approved to continue onsite.**

**Q9) Will the proposed activity be conducted at or on:**

a) the UW-Madison campus?	Yes
b) UW-owned facilities not on the Madison campus?	Yes
c) Non-UW field sites?	Yes

**Q9.1) The PI and the person identified earlier as the collaborator/reviewer of this request will use the information provided here to develop a department or building calendar for planning and tracking access to spaces.**

**Buildings will remain locked during Phase 1; the list you provide will be used to generate a comprehensive list of individuals approved for building access. PIs must prioritize the scope of research activities they request to conform to guidelines: <https://research.wisc.edu/reboot-phase1> that limit the number and density of people, including human research participants, in buildings and rooms used for research and scholarly activities.**

**For each member of the research team included in this request to work on campus or at a UW-owned facility, please list their name, title, the building number AND name following the format "0015 Memorial Library" (building numbers can found here: <https://map.wisc.edu/buildings/>) and room where that person will work and a proposed schedule and total hours per week. Furlough reduction in hours should be taken into consideration.**

**Please note that this table of data fields is wider than some display screens will show all at once, so you may need to scroll to the right in the pane below to see all fields.**

Name (last, first)	Title	Buildi ng Numb er & Name	Room	Su	Mo	Tu	We	Tr	Fr	Sa	Total Hrs/W eek
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1	Coller , Max	IT Guy	0050 Basco m Hall	302	✘	✔	✔	✔	✔	✔	✘	40
2					✘	✘	✘	✘	✘	✘	✘	
3					✘	✘	✘	✘	✘	✘	✘	
4					✘	✘	✘	✘	✘	✘	✘	
5					✘	✘	✘	✘	✘	✘	✘	
6					✘	✘	✘	✘	✘	✘	✘	
7					✘	✘	✘	✘	✘	✘	✘	
8					✘	✘	✘	✘	✘	✘	✘	
9					✘	✘	✘	✘	✘	✘	✘	
10					✘	✘	✘	✘	✘	✘	✘	

**Q9.1.1) Are there additional rows of data you wish to add to the above table?**

Yes



**Q9.1.2) Additional personnel**

	Name (last, first)	Title	Buildi ng Numb er & Name	Room	Su	Mo	Tu	We	Tr	Fr	Sa	Total Hrs/W eek
1	Baggi ns, Bilbo	Hobbit	0050 Basco m Hall	302	✓	✗	✗	✗	✗	✗	✓	16
2					✗	✗	✗	✗	✗	✗	✗	
3					✗	✗	✗	✗	✗	✗	✗	
4					✗	✗	✗	✗	✗	✗	✗	
5					✗	✗	✗	✗	✗	✗	✗	
6					✗	✗	✗	✗	✗	✗	✗	
7					✗	✗	✗	✗	✗	✗	✗	
8					✗	✗	✗	✗	✗	✗	✗	
9					✗	✗	✗	✗	✗	✗	✗	
10					✗	✗	✗	✗	✗	✗	✗	

**Q9.1.3) Are there additional rows of data you wish to add to the above table?**

Yes

**Q9.1.4) Additional personnel**

	Name (last, first)	Title	Buildi ng Numb er & Name	Room	Su	Mo	Tu	We	Tr	Fr	Sa	Total Hrs/W eek
1	Neutr on, Jimm y	Subat omic Partic le	0050 Basco m Hall	302	✓	✓	✓	✓	✓	✓	✓	70
2					✗	✗	✗	✗	✗	✗	✗	
3					✗	✗	✗	✗	✗	✗	✗	
4					✗	✗	✗	✗	✗	✗	✗	
5					✗	✗	✗	✗	✗	✗	✗	
6					✗	✗	✗	✗	✗	✗	✗	
7					✗	✗	✗	✗	✗	✗	✗	
8					✗	✗	✗	✗	✗	✗	✗	
9					✗	✗	✗	✗	✗	✗	✗	
10					✗	✗	✗	✗	✗	✗	✗	

**Q9.2) For each member of the research team who will be working at a non-UW field site, please list their name, title, location(s), where that person’s work is scheduled, days at the location, and total hours per week below. Furlough reduction in hours should be taken into consideration.**

**The PI and the person identified earlier as the reviewer of this request will use the information you provide here to develop a calendar for planning and tracking access to this non-UW field site.**

**Approved requests must comply with UW research guidelines for reducing the number and density of people working and the amount of time people spend in buildings and rooms, as well as requirements at the host site.**

**Please note that this table of data fields is wider than some display screens will show all at once, so you may need to scroll to the right in the pane below to see all fields.**

	Name (last, first)	Title	Site	Schedule Description
1	Coller, Max	IT Guy	Kitchen Table	I'll be working there for the duration.
2				
3				
4				
5				
6				
7				
8				
9				
10				

**Q9.2.1) Are there additional rows of data you wish to add to the above table?**

Yes

**Q9.2.2) Additional Personnel**

	Name (last, first)	Title	Site	Schedule Description
1	Baggins, Bilbo	Hobbit	Underground Lair	Working on stuff
2				
3				
4				
5				
6				
7				
8				
9				
10				

**Q9.2.3) Are there additional rows of data you wish to add to the above table?**

Yes

**Q9.2.4) Additional Personnel**

	Name (last, first)	Title	Site	Schedule Description
1	Neutron, Jimmy	Subatomic Partice	All of the sites	All the time
2				
3				
4				
5				
6				
7				
8				
9				
10				

**Q9.3 Please review current travel guidance: <https://businessservices.wisc.edu/travel-reimbursement/>. Note that through June 30, no air travel is permitted, there may be only one passenger per car.**

**Will the proposed research involve travel by:**

a) Air	Yes
b) Car or Van	Yes

**Q9.3.1) An exception is required for air travel at this time. See the link above in Q9.3 for the procedure to follow.**

**Q9.3.2) An exception will be required if there is more than one person per vehicle.**

**Q10) Do the proposed research activities require any Personal Protective Equipment (PPE), either normally or because PPE are being added to the research protocol for situations where 6 feet of physical distancing is not possible?**

Yes

**Q10.1) Procurement of PPE is currently being managed centrally [email contact: [EOC\\_PPE\\_Supplies@lists.wisc.edu](mailto:EOC_PPE_Supplies@lists.wisc.edu)], and availability of some types is currently limited. This may limit the scope of approved activities.**

**Will the proposed research require:**

a) gloves?	Yes
b) surgical procedure masks?	Yes
c) cloth face coverings?	Yes
d) n95 respirator masks?	Yes
e) lab coats?	Yes
f) safety glasses?	Yes
g) face shields?	Yes
h) other?	Yes

**Q10.1.1 Please list Other PPE required:**

Footie pajamas

**Q11) Do the proposed research activities involve use of books, journals, or other physical materials held in a library, archive, or museum (including Wisconsin Historical Society)?**

Yes

**Q11.1) For access to physical materials held in a library or archive, identify their location by category. (Check all that apply.) For access to physical materials held in a museum, please give the relevant building number AND name in the Q9 table.**

**Responses Selected:**

(a) Law Library
(b) Ebling Health Sciences Library
(c) Wisconsin Historical Society Library & Archives
(d) Memorial Library
(e) all other campus locations
(f) don't know which location

**Q12) Do the proposed research activities involve use of an on-site center for accessing restricted data, or a facility listed in the Research Cores directory (<https://resources.research.wisc.edu>), or other shared resource?**

Yes

**Q12.1) Please list the names of the shared resources that the proposed research activities require:**

Breakroom coffee machine

**Q12.2) Will the proposed research involve:**

a) dropping off or picking up items, such as samples or research material?	Yes
b) personnel from your group using research core instrumentation?	Yes
c) personnel from your group using research resource facilities?	Yes



**Q13) Please review the UW Environment, Health and Safety Guidance for Facilities Start-up:**  
<https://d1cjb8q1w2lzm7.cloudfront.net/wp-content/uploads/sites/22/2020/05/EHS-ADM-GUI-002.pdf>

**In order to mitigate the spread of COVID-19, will the proposed research activity incorporate:**

a) staggering staff schedules over different days of week and different times of day?	Yes
b) maintaining physical distance of at least 6 ft apart?	Yes
c) maintaining a minimum of 350 sq. ft. per person in rooms, or one person per room for rooms smaller than 700 sq. ft.?	Yes
d) optimizing traffic flow (e.g. designated entries and exits to rooms when possible)?	Yes
e) detailed disinfection protocols that specify when and how to wash hands and wipe down benches, equipment, and doorknobs?	Yes
f) protocols for cleaning and monitoring equipment that is shared within your group and/or with other groups?	Yes
g) maintaining adequate supplies to perform the disinfection protocols located at the points where disinfection is needed?	Yes
h) maintaining adequate supplies of PPE required for research activities available at the points where they will be used? (NOTE: Availability of some types of PPE is currently limited and will be supplied centrally.)	Yes
i) monitoring compliance with lab safety protocols?	Yes

**Q14) Have all research group members been informed to notify the PI if they are uncomfortable conducting on-site research or scholarly activity? (Additional coordination with the divisional HR office on accommodations will be required.)**

Yes

**Q15) The current status of this Research Reboot Proposal is:**

It has been reviewed by department chair/director

**Thank you for providing this information. By submitting this request you are committing to ensure that all research staff will follow campus and unit guidelines to reduce the risk of COVID-19 transmission.**

**[See campus guidelines and resources at <https://facilities.fpm.wisc.edu/returning-to-campus-safely/> ]**

**Upon submission, the PI identified in Q1 will get an email confirming that the request was successfully submitted. Here are the next steps:**

- a. This form will be forwarded to the person identified as the reviewer of this request.**
- b. Schedule of requested activities must be approved by the reviewer**
- c. Log back in to update the request upon request of the reviewer or if the type, schedule, or level of the activity changes.**