resource to assist in the search.

The training opportunities discussed in the article can be costly in terms of time and money. Training programs using computer technology are one way to deal with this limitation. Although not yet widely available, interactive computer training is being developed and marketed in many disciplines. We expect that the quality and variety of such programs will continue to increase and will provide interesting and valuable alternatives to the traditional methods of classroom training.

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1. Dembry LM, Hierholzer WJ Jr. Educational needs and opportunities for the hospital epidemiologist. *Infect Control Hosp Epidemiol* 1996;17:188-192.

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Correction

Understaffing: A Risk Factor for Infection in the Era of Downsizing?

It has been brought to our attention that a word was changed inappropriately in the editorial "Understaffing: A Risk Factor for Infection in the Era of Downsizing" (1996;17:147-149). On page 148, column 2, paragraph 1, the second sentence should read "Further studies of the effects of povidone-iodine ointment and of gauze versus transparent dressings will be needed to confirm their utility."

CDC Restricts Transfer of Biohazards

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Medical News Editors

The CDC has proposed new rules that would impose additional requirements on facilities that ship or receive infectious agents capable of causing substantial harm to human health. Of special concern are those agents that cause anthrax, botulism, brucellosis, plague, tularemia, and all agents classified at a Biosafety Level 4.

These facilities include laboratories operated by governmental agencies, universities, research institutions, and commercial entities. Congress recently was alerted to the issue of potential harmful agents falling into the hands of those who might use them to inflict harm after news reports about an individual in Ohio who successfully ordered bubonic plague from a commercial company in Maryland that sells stocks of cultures to academia and industry. In other cases reported by the press, private individuals were able to obtain the ingredients needed to manufacture sarin gas, the substance that killed 12 people in a terrorist attack in a Japan subway in 1995.

The proposed rule stipulates that facilities that wish to handle these biologic agents must register with the CDC to ensure that the facility meets appropriate biosafety level requirements for handling the agents. The new rules also call for a standardized transfer form for tracking in case of wrongful transfer; written verification from the facility of receipt of the infectious agent; and a signed statement promising that the agents will be stored properly, destroyed after completion of work, or transferred to an approved repository.

Clinical specimens transferred for diagnosis and verification would be exempt from the rules, as would dilute solutions of toxins for medical use and vaccine strains of restricted viral agents.

FROM: Centers for Disease Control and Prevention. Requirements for facilities transferring or receiving infectious agents. *Federal Register* June 10, 1996;61(112):29327-29333.

Rovner J. US to restrict transfer of biohazards. *Lancet* 1996;347:1759.

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