

IX. Facility and Species Inventory

[illegible]

*Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.

VII. Membership of the IACUC

Chairperson Name, Title, and Degree/Credentials		Business Address, Phone, Fax, and Email of Chairperson		
Name: Brian Parr	Address: East Campus CRC 342B 1 Discovery Drive Rensselaer NY 12144-3456			
Title: Principal Research Scientist				
Degree/credentials: Ph.D. Evolutional Biology	Phone: (b) (6)	Fax:	Email: bparr@albany.edu	

Name of Member/Code*	Degree/Credentials	Area of Study	Position Title***	PHS Policy Membership Requirements**
Antigone McKenna	DVM	Veterinary Medicine	Veterinarian/LAR director	Attending Veterinarian
(b) (6)				Scientist
				Non-Scientist / Non-Affiliated
				Scientist
				Scientist



MEMORANDUM

TO: James Dias
Vice President for Research
(b) (6)

FROM: Adrienne D. Bonilla, on behalf of
Institutional Animal Care and Use Committee (IACUC)

DATE: March 31, 2016

RE: IACUC Semi-Annual Report

This report constitutes the semiannual evaluation of the University at Albany's laboratory animal care and use program by the Institutional Animal Care and Use Committee (IACUC).

Semi-Annual Report to VPR Animal Program Reporting Period: Sep 01, 2015 – Feb 29, 2016

SUMMARY

Semi-Animal Facility Inspection – EC	10/28/2015
Semi-Animal Facility Inspection -- MC	10/29/2015
Semi-Annual Program Review	11/19/2015

With regard to the semi-annual program review of the University's animal care and use program, overall, the Committee found the program to be in compliance.

With respect to the semi-annual facility inspections, inspected areas were observed to be in compliance.

The facility inspection reports and program review reports are attached.



IACUC SEMIANNUAL FACILITY INSPECTION REPORT

Instructions for Inspectors:

1. Inspect each area using the criteria listed in each section below.
2. Identify the room number for which you would like to enter a comment.
3. For each room number selected, indicate one of the following choices:

A Acceptable
M Minor deficiency
S Significant deficiency (is or may be a threat to animal health or safety),
SFI Suggestion For Improvement
4. Enter the required timeline for corrective action, if a deficiency is identified.
5. Enter a comment with sufficient detail to inform the facility manager and the IACUC of the issue and the specific corrective action required.

DATE OF INSPECTION: 10/28/2015 9:00 AM Main Campus ☐ East Campus ☒

INSPECTOR: Brian Parr, (b) (6)

Animal Housing Areas

Animal Housing and Support Areas

(animal condition, appropriate food and water, separation by species, separation by disease status, exercise, behavioral management, animal records present, lighting acceptable, temp/humidity logs, ventilation/air exchanges, clean cages/ racks, proper waste disposal, proper use of hazardous agents, surfaces easily sanitized, room clean and neat, proper no. of animals/cage, animal equipment clean, weather protection, bedding, NYSDOH certificate posted)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							(b) (4) - Mouse in vent rack
	X							- Mouse
	X							- Mouse
	X							Mouse
	X							(b) (4) - Mouse
	X							(b) (4) - Rat

Animal Housing and Support Areas

(animal condition, appropriate food and water, separation by species, separation by disease status, exercise, behavioral management, animal records present, lighting acceptable, temp/humidity logs, ventilation/air exchanges, clean cages/ racks, proper waste disposal, proper use of hazardous agents, surfaces easily sanitized, room clean and neat, proper no. of animals/cage, animal equipment clean, weather protection, bedding, NYSDOH certificate posted)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							Storage
	X							Drug room

Food Storage Areas

(type and distribution, expiration date labeling, rotation of stocks, storage in sealed containers, quality control, located off the floor and away from the walls)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							Storage

Bedding Storage Space

(type and use, storage)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							
	X							

Water Source

(treatment and distribution, quality control)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							Cage wash – clean side

Cleaning and Sanitation

(cages, feeders, water distribution system, room, general facility, waste disposal [storage, hazardous wastes, carcasses])

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							Cage wash – dirty side

Personnel

(SOP's, protocols [available, number posted], designated area, emergency, weekend and holiday)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							(b) (4)
	X							
	X							
	X							
	X							(b) (4)
	X							(b) (4)

Occupational Health and Safety

(personal protective equipment)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							

Infrastructure/Construction

(security, walls, floors, ceilings, doors, HVAC, power and lighting, drainage)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							

Specialized Space

(receiving, quarantine/isolation, necropsy, diet preparation, imaging, surgery, procedure, cage wash, carcass disposal)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							Quarantine area - vacant
	X							Euthanasia / Procedure Room
	X							Necropsy Freezer
	X							Cage wash- Clean side
	X							Cage wash- Dirty side
	X							Receiving area

Procedure Rooms**General**

(drug storage, control and expiration dates, sharps disposal (SOP), anesthetic monitoring, gas cylinders immobilized, Appropriate hazard signs, carcass disposal, transport of animals to and from animal housing, length of time in procedure room, NYSDOH certificate posted)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							Parr Lab
	X							(b) (4) – Surgery room
	X							– Surgery room
	X							(b) (4)
	X							LAR staff use
	X							Neural Stem Cell Institute
	X							Neural Stem Cell Institute
	X							Neural Stem Cell Institute
	X							Neural Stem Cell Institute

Additional Concerns for Survival Surgery (rodent or minor procedures only --- rodent survival surgery clean and uncluttered, not used for anything else during surgery)

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
(b) (4)	X							
	X							
	X							

Animal Housing and Support Areas – Aquatic Specific
UNIVERSITY AT ALBANY

State University of New York

(standards for acceptable quality are established, chlorine, chloramines, chemical, and reactive bioproducts are removed or neutralized prior to use in aquatic systems, primary enclosure provides a balanced, stable environment Construction allows undisturbed observation and with nontoxic materials, prevents electrical hazards, environment enrichment elicits appropriate behaviors and is safe semi-aquatic reptiles are provided terrestrial areas, nets are cleaned, disinfected and managed to avoid contamination of systems, water quality parameters and frequency of testing recorded, records kept on feeding, non-expired food supplies, live cultures, frequency of tank/cage cleaning and disinfection is determined by water quality, permits adequate viewing and health monitoring

Room No.	A	M	S	SFI	2wks	4wks	Other	Comments
NA								** NO AQUATIC ANIMALS IN EAST CAPUS **

REPORT SUMMARY

<input checked="" type="checkbox"/>	We have inspected all the listed rooms and found no deficiencies.
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Note: Please check the box above ONLY if no data has been entered on the inspection form.

Notes/comments No deficiencies – all rooms are set up and used appropriate manner

Administrative Notes:

**** Information sheet of Lab on animal housing door (include Personnel/contact information and protocol numbers) need to be updated by the Facility.**

**** Report of concern and contact information to the ORRC need to be posted in the common area.**

REPORT SUMMARY

<input type="checkbox"/>	We have inspected all the listed rooms and found no deficiencies.
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Note: Please check the box above ONLY if no data has been entered on the inspection form.

Deficiencies				
<ul style="list-style-type: none"> ➤ For each deficiency identified, specify the "correct by date." ➤ LAR is responsible for addressing all deficiencies (significant and minor) within the timeframe required by the IACUC, and informing the IACUC (via ORRC) of the final resolution. ➤ When Suggestions for Improvement are made, LAR must address whether or not the suggestions were incorporated. ➤ Significant deficiencies that are not corrected within the required timeframe must be reported to the appropriate regulatory agency. 				
Room No.	Acceptable	Minor deficiencies	Significant deficiencies	Suggestions For Improvements

Commendations:

Notes/comments:

Signature: All subcommittee members conducting this inspection must sign below.	
Print Brian Parr	Signature (b) (6)
Print (b) (6)	Signature

REPORT SUMMARY

<input type="checkbox"/>	We have inspected all the listed rooms and found no deficiencies.
--------------------------	--

Note: Please check the box above ONLY if no data has been entered on the inspection form.

Deficiencies				
<ul style="list-style-type: none"> ➤ For each deficiency identified, specify the "correct by date." ➤ LAR is responsible for addressing all deficiencies (significant and minor) within the timeframe required by the IACUC, and informing the IACUC (via ORRC) of the final resolution. ➤ When Suggestions for Improvement are made, LAR must address whether or not the suggestions were incorporated. ➤ Significant deficiencies that are not corrected within the required timeframe must be reported to the appropriate regulatory agency. 				
Room No.	Acceptable	Minor deficiencies	Significant deficiencies	Suggestions For Improvements

Commendations:

Notes/comments:

Signature: All subcommittee members conducting this inspection must sign below.	
Print Brian Parr	Signature (b) (6)
Print (b) (6)	Signature (b) (6)

IACUC SEMIANNUAL FACILITY INSPECTION REPORT

Instructions for Inspectors:

1. Inspect each area using the criteria listed in each section below.
2. Identify the room number for which you would like to enter a comment.
3. For each room number selected, indicate one of the following choices:

- A** Acceptable
- M** Minor deficiency
- S** Significant deficiency (is or may be a threat to animal health or safety),
- SFI** Suggestion For Improvement

4. Enter the required timeline for corrective action, if a deficiency is identified.

5. Enter a comment with sufficient detail to inform the facility manager and the IACUC of the issue and the specific corrective action required.

DATE OF INSPECTION: **October 29, 2015** **Main Campus** ☒ **East Campus** ☐
 Inspector : (b) (6)

Animal Housing Areas

Animal Housing and Support Areas

(animal condition, appropriate food and water, separation by species, separation by disease status, exercise, behavioral management, animal records present, lighting acceptable, temp/humidity logs, ventilation/air exchanges, clean cages/ racks, proper waste disposal, proper use of hazardous agents, surfaces easily sanitized, room clean and neat, proper no. of animals/cage, animal equipment clean, weather protection, bedding, NYSDOH certificate posted)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						(b) (4)
	X						
		X					(b) (4) - Rats Protocol # error on cage card (Responsible Party: Investigator)*
	X						(b) (4) Rat
	X						Mice; The number of animals noted on the card did not match the number of animals inside of the cage. Newly born animals (DOB = 10/28/15) were missing bedding. (Responsible Party: Facility) **
	X						(b) (4)
	X						Mice
		X					The protocol numbers posted on the doors do not match the protocol numbers listed on the cages. (Responsible Party: Facility) **

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X		X			(b) (4) - Mice ** NO LAB CONTACT INFORMATION The signage on the door was missing. (Responsible Party: Facility) **
		X					(b) (4) Chemical abbreviations are not permitted. Two bottles of ethanol were labeled as 70% ETOH on the countertop. A bottle was labeled as dH2O. A bottle was labeled as PBS. (Responsible Party: Investigator)*

Food Storage Areas (type and distribution, expiration date labeling, rotation of stocks, storage in sealed containers, quality control, located off the floor and away from the walls)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						

Bedding Storage Space (type and use, storage)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						*Room locate at animal housing area Flammables are not permitted to be stored in a regular refrigerator due to an explosion hazard. Chemical abbreviations are not permitted. Two tubes were labeled as ETOH and being improperly stored in a regular refrigerator. This is a fire safety violation. (Responsible Party: Facility) **

Water Source (treatment and distribution, quality control)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X		X			Cage wash, clean side All containers must be properly labeled. The white (possibly empty) carboy next to the Quadracide container was missing a label. It was mentioned that the cleaning system is not functional or is not being used. If so, containers from this system should be disposed of accordingly. (Responsible Party: Facility) **
		X					Cage wash, dirty side Eye wash is not being tested weekly and the last annual inspection was conducted on 11/1/13. (Responsible Party: Facility) **

Cleaning and Sanitation (cages, feeders, water distribution system, room, general facility, waste disposal [storage, hazardous wastes, carcasses])

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X		X			Cage wash, clean side All containers must be properly labeled. The white (possibly empty) carboy next to the Quadracide container was missing a label. It was mentioned that the cleaning

(b) (4)							system is not functional or is not being used. If so, containers from this system should be disposed of accordingly. (Responsible Party: Facility) **
		X					Cage wash, dirty side Eye wash is not being tested weekly and the last annual inspection was conducted on 11/1/13. (Responsible Party: Facility) **

Personnel (SOP's, protocols [available, number posted], designated area, emergency, weekend and holiday)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						(b) (4)
	X						
		X		X			(b) (4) Rats The protocol numbers posted on the door do not match the protocol numbers listed on the cages. (Responsible Party: Facility) **
	X						(b) (4) Rat
	X						Mice
	X						
	X						Mice
		X		X			The protocol numbers posted on the doors do not match the protocol numbers listed on the cages. Suggest updating the labeling system. (Responsible Party: Facility) **
		X		X			(b) (4) - Mice ** NO LAB CONTACT INFORMATION (Responsible Party: Facility) **
	X						(b) (4)

Infrastructure/Construction (security, walls, floors, ceilings, doors, HVAC, power and lighting, drainage)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						Storage
	X						Storage
	X						Storage
	X						Storage
	X						(b) (4) Procedure Room
	X						Storage
	X						Storage

Occupational Health and Safety (personal protective equipment)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						Changing room

Specialized Space (receiving, quarantine/isolation, necropsy, diet preparation, imaging, surgery, procedure, cage wash, carcass disposal)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X					<p>Necropsy Room</p> <p>Hazardous waste should be disposed of on a regular basis. The cabinets under the hood contained an excessive amount of hazardous waste. (Responsible Party: Facility) **</p> <p>The Spill-X-FP for formaldehyde spills is no longer usable and should be replaced with a new one. All containers must be properly labeled. Two carboys were labeled with the PI's (McNay) name. (Responsible Party: Investigator)*</p> <p>Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH. A bottle was labeled as 0.9% NaCl in the refrigerator. A bottle was labeled as PBS, also in the refrigerator. (Responsible Party: Facility) ** (Responsible Party: Investigator)*</p>
	X						Receiving Room
	X						Euthanasia room
	X						Quarantine Area

Additional Concerns for Survival Surgery

(rodent or minor procedures only --- rodent survival surgery clean and uncluttered, not used for anything else during surgery)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X					<p>Surgery Room</p> <p>The floor drain for the auto-clave is corroding and should be cleaned/replaced. All containers must be properly labeled. Two containers (possibly empty) under the sink were missing labels. (Responsible Party: Facility) **</p>
	X						Recovery
	X						New Surgery Room

Procedure Rooms

General(drug storage, control and expiration dates, sharps disposal (SOP), anesthetic monitoring, gas cylinders immobilized, Appropriate hazard signs, carcass disposal, transport of animals to and from animal housing, length of time in procedure room, NYSDOH certificate posted)

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X					<p>The safety shower and eye wash are not being tested weekly or annually (Responsible Party: Facility) **</p>

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X					(b) (4) Procedure Room: Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH on the cart. All containers must be properly labeled. Some of the containers should be re-labeled with their contents. (Responsible Party: Investigator)*
		X					(b) (4) Procedure Room: If the cabinet in the laboratory is being used as a bio-safety cabinet, the cabinet must be inspected routinely and the filter must be changed per manufacturer's specification. There were no marking on the cabinet as to when the last inspection was performed. General housekeeping recommendation in the laboratory (Responsible Party: Investigator)*
	X						Animal Receiving Room
		X					Chemical abbreviations are not permitted. A bottle of ethanol was labeled as ETOH and a bottle of distilled or deionized water was labeled as dH2O (Responsible Party: Investigator)*
		X		X			Common procedure Area; (b) (4) Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH KO 11/25/14 on top of the refrigerator. (Responsible Party: Investigator)* Another similarly labeled bottle was on top of another refrigerator. If hazardous chemicals are no longer being used, they should be disposed of as Hazardous Waste. (Responsible Party: Investigator)* All containers must be properly labeled. The label on the distilled water label on the container was fading and should be re-labeled. The label on the Alconox squirt bottle was fading and should be re-labeled. The refrigerator had 4 tubes of frozen material dated 2013/2014. If the material is no longer being used, it should be disposed of accordingly. (Responsible Party: Investigator)* The eye wash is not being tested weekly or annually (Responsible Party: Facility) **

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X						Not in use
		X					(Common Area) Eye wash is not being tested weekly and the last annual inspection was conducted on 11/1/13 (Responsible Party: Facility) **
		X					(b) (4) Behavioral test room) Chemical abbreviations are not permitted. A bottle of ethanol in a Glass Plus bottle was labeled as ETOH (Responsible Party: Investigator)*
	X						(b) (4)
	X						Behavioral testing room – Fear Conditioning Box
	X						Facility storage
	X						(b) (4) Water maze pool with PC
		X		X			An empty bottle of Coffee-mate was being stored in one of the cabinets. The ceiling had loose joint compound. (Responsible Party: Investigator)*
	X						Not in use
	X						Not in use
		X					Not in use The ethanol label on the bottle was fading and should be re-labeled (Responsible Party: Facility) **
	NA						Behavioral test procedure room
	NA						Behavioral test procedure room
	NA						Behavioral test procedure room
	NA						Behavioral test procedure room
	NA						Behavioral test procedure room
	NA						Behavioral test procedure room
~ 25: those rooms were in use while the inspection; thus no inspection conducted these 6 rooms							
		X					A (4') lamp was sitting on the countertop. Used lamps, ballasts, batteries and certain mercury containing devices are classified as Universal Waste and must be managed accordingly. Improper stored is a violation **User not known
		X					Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH **User not known
		X					Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH **User not known

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)		X					Chemical abbreviations are not permitted. Two bottles of ethanol was labeled as 70% ETOH. **User not known
		X		X			The light switch was obstructed by the Suncast cabinet. Suggest moving the cabinet to a new location. Chemical abbreviations are not permitted and all containers must be properly labeled. A bottle of ethanol was labeled as 70% ETOH and the label was fading. Another bottle was labeled 70% ETOH KO 11/25/14 on top of the cart. If hazardous chemicals are no longer being used, they should be disposed of as Hazardous Waste. **User not known
		X		X			The light switch was obstructed by equipment. Suggest moving the equipment to a new location. The eye wash is not be tested weekly or annually. (Responsible Party: Facility) **
	X						Break Room for Animal care staff
							(Storage) A surge protector was plugged into another surge protector and the cord was running into (b) (4) via a hole in the wall. This is a fire safety violation (Responsible Party: Facility) **
							(b) (4) Common Area: Chemical abbreviations are not permitted. Three bottles of ethanol were labeled as 70% ETOH. Two additional bottles were labeled as PBS (Responsible Party: Investigator)*
		X		X			The eye wash is not being inspected weekly or annually. Review of the drug inventory log suggests updating the labeling system to identify those drugs being stored outside of B-038. (Responsible Party: Facility) **
	X						(b) (4)

Animal Housing and Support Areas – Aquatic Specific

(standards for acceptable quality are established, chlorine, chloramines, chemical, and reactive bioproducts are removed or neutralized prior to use in aquatic systems, primary enclosure provides a balanced, stable environment Construction allows undisturbed observation and with nontoxic materials, prevents electrical hazards, environment enrichment elicits appropriate behaviors and is safe semi-aquatic reptiles are provided terrestrial areas, nets are cleaned, disinfected and managed to avoid contamination of systems, water quality parameters and frequency of testing recorded, records kept on feeding, non-expired food supplies, live cultures, frequency of tank/cage cleaning and disinfection is determined by water quality, permits adequate viewing and health monitoring

Room No.	A	M	S	SFI	2wks	4wks	Comments
(b) (4)	X		X				There are holes on the wall for piping. Holes need to be fixed (Responsible Party: Facility) **
	X		X				

REPORT SUMMARY

<input checked="" type="checkbox"/>	We have inspected all the listed rooms and found no deficiencies.
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Deficiencies				
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Room No.	Acceptable	Minor deficiencies	Significant deficiencies	Suggestions For Improvements

Signature: All subcommittee members conducting this inspection must sign below.	
Print (b) (6)	Signature
Print	Signature

REPORT SUMMARY

<input type="checkbox"/>	We have inspected all the listed rooms and found no deficiencies.
--------------------------	--

Note: Please check the box above ONLY if no data has been entered on the inspection form.

Deficiencies				
<p>➤ For each deficiency identified, specify the "correct by date."</p> <p>➤ LAR is responsible for addressing all deficiencies (significant and minor) within the timeframe required by the IACUC, and informing the IACUC (via ORRC) of the final resolution.</p> <p>➤ When Suggestions for Improvement are made, LAR must address whether or not the suggestions were incorporated.</p> <p>➤ Significant deficiencies that are not corrected within the required timeframe must be reported to the appropriate regulatory agency.</p>				
Room No.	Acceptable	Minor deficiencies	Significant deficiencies	Suggestions For Improvements

Commendations:

Notes/comments:

Signature: All subcommittee members conducting this inspection must sign below.			
Print	(b) (6)	Signature	(b) (6)
Print	(b) (6)	Signature	(b) (6)

Notes/comments: Administrative Notes

For both East Campus and Uptown Campus:

- (1) Many signees outdated (there are signage that include previous facility manager's name) on facility doors
- (2) Many signage on animal housing area outdated - name of investigator, protocol number(s) and lab contact person information.
- (3) There is no contact information or post for "report for concern" to the ORRC.

Uptown Campus:

- (1) Note for (b) (4) Procedure Room; this procedure room is locate in the animal housing area. Is this acceptable?
- (2) Drug Safe – during this inspection, the IACUC notified there are 3 drugs keep in out of animal facility/drug safe area.
** (b) (4): Testosterone stored in safe (There is no note and record on protocol file and IACUC meeting minutes)

** (b) (4): Because the drug must keep it in freezer and Animal facility don't have freezer (There is no note and record on protocol file and IACUC meeting minutes)

** Biology (b) (4) Cocaine stored in the biology building – Solution for the drug cannot bring in the animal facility thus investigator make drug at his lab and bring into animal testing lab (There is no note and record on protocol file and IACUC meeting minutes)
- (3) IACUC requested to the ORRC to contact the building manager of Biology building to fix holes on wall (Bio 24 and 25); this need to be notified PI and fixed by the Facility (not the compliance office)

(1) Listed items below reported deficiency on 10/29/2015 Main Campus Facility Inspection.

Room No.	Findings	* Listed items corrected	** Listed items corrected	Comments
		YES	NO	
(b) (4)	Signs on all animal housing rooms needs to be update such as Protocol numbers, Lab contact person information, Personnel	X		Facility received updated posting for each animal room containing current protocol numbers and contact details.
	All The safety shower and eye wash are not being tested weekly or annually	X On Process		On process to set up weekly or annual test – LAR sent a note the Life Science building manager regarding the eyewash and safety shower testing issue. The LAR are working out how best to accomplish this task i.e., with LAR or facility staff.
	All The safety shower and eye wash are not being tested weekly or annually	X On Process		
	All The safety shower and eye wash are not being tested weekly or annually	X On Process		
	The floor drain for the auto-clave is corroding and should be cleaned/replaced. All containers must be properly labeled. Two containers (possibly empty) under the sink were missing labels.	X		Labeling of chemicals: Pre-printed labels have been developed
	Room locate at animal housing area Flammables are not permitted to be stored in a regular refrigerator due to an explosion hazard. Chemical abbreviations are not permitted. Two tubes were labeled as ETOH and being improperly stored in a regular refrigerator. This is a fire safety violation.		X	Action needed on this item (3/25/16)
	Necropsy Room : Hazardous waste should be disposed of on a regular basis. The cabinets under the hood contained an excessive amount of hazardous waste.	X		PI to be notified to arrange for the removal of waste.
	Necropsy Room : The Spill-X-FP for formaldehyde spills is no longer usable and should be replaced with a new one. All containers must be properly labeled. Two carboys were labeled with the PI's (McNay) name.	X On Process		A new kit will be order the week of 3/27.
	Cage wash, clean side: All containers must be properly labeled. The white (possibly empty) carboy next to the Quadracide container was missing a label. It was mentioned that the cleaning system is not functional or is not being used. If so, containers from this system should be disposed of accordingly.	X		Labeling of chemicals: Pre-printed labels have been developed

Room No.	Findings	*Listed items corrected	* Listed items corrected	Comments
		YES	NO	
(b) (4)	Cage wash, dirty side: Eye wash is not being tested weekly and the last annual inspection was conducted on 11/1/13.	X On Process		On process to set up weekly or annual test – LAR sent a note the Life Science building manager regarding the eyewash and safety shower testing issue. The LAR are working out how best to accomplish this task i.e., with LAR or facility staff.
	The ethanol label on the bottle was fading and should be re-labeled	X		Labeling of chemicals: Pre-printed labels have been developed
	A (4') lamp was sitting on the countertop. Used lamps, ballasts, batteries and certain mercury containing devices are classified as Universal Waste and must be managed accordingly. Improper stored is a violation	X		Lamp to be disposed of week of 3/27
	Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH	X		Labeling of chemicals: Pre-printed labels have been developed
	Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH	X		Labeling of chemicals: Pre-printed labels have been developed
	Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH	X		Labeling of chemicals: Pre-printed labels have been developed
	The light switch was obstructed by the Suncast cabinet. Suggest moving the cabinet to a new location. Chemical abbreviations are not permitted and all containers must be properly labeled. A bottle of ethanol was labeled as 70% ETOH and the label was fading. Another bottle was labeled 70% ETOH KO 11/25/14 on top of the cart. If hazardous chemicals are no longer being used, they should be disposed of as Hazardous Waste.	X On Process		Room arrangement will be discussed with the PI. Labeling being addressed as indicated earlier.
	The light switch was obstructed by equipment. Suggest moving the equipment to a new location. The eye wash is not be tested weekly or annually.	X On Process		Same as above.
	A surge protector was plugged into another surge protector and the cord was running into (b) (4) via a hole in the wall. This is a fire safety violation	X		A new, longer cord will be ordered.
	Review of the drug inventory log suggests updating the labeling system to identify those drugs being stored outside of (b) (4)	X		
	There are holes on the wall for piping. Holes need to be fixed	X		Facility management contacted to initiate repairs in the areas identified in the inspection report.

Room No.	Findings	Listed items corrected	Listed items corrected	Comments
		YES	NO	
(b) (4)	(b) (4)- Rats Protocol # error on cage card	X		Cage cards were corrected at the time of the inspection. PI and research staff notified of the mislabeling.
	Chemical abbreviations are not permitted. Two bottles of ethanol were labeled as 70% ETOH on the countertop. A bottle was labeled as dH2O. A bottle was labeled as PBS.	X		Labeling of chemicals: Pre-printed labels have been developed
	Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH on the cart. All containers must be properly labeled. Some of the containers should be re-labeled with their contents.	X		Labeling of chemicals: Pre-printed labels have been developed
	If the cabinet in the laboratory is being used as a bio-safety cabinet, the cabinet must be inspected routinely and the filter must be changed per manufacturer's specification. There were no marking on the cabinet as to when the last inspection was performed. General housekeeping recommendation in the laboratory	X		Room was cleaned. The cabinet utility is being discussed with the PI.
	Chemical abbreviations are not permitted. A bottle of ethanol was labeled as ETOH and a bottle of distilled or deionized water was labeled as dH2O	X		Labeling of chemicals: Pre-printed labels have been developed
	Chemical abbreviations are not permitted. A bottle of ethanol was labeled as 70% ETOH KO 11/25/14 on top of the refrigerator.	X		Labeling of chemicals: Pre-printed labels have been developed
	Another similarly labeled bottle was on top of another refrigerator. If hazardous chemicals are no longer being used, they should be disposed of as Hazardous Waste	X		Same as above.
	All containers must be properly labeled. The label on the distilled water label on the container was fading and should be re-labeled. The label on the Alconox squirt bottle was fading and should be re-labeled. The refrigerator had 4 tubes of frozen material dated 2013/2014. If the material is no longer being used, it should be disposed of accordingly	X		Same as above.

Room No.	Findings	Listed items corrected	Listed items corrected	Comments
		YES	NO	
(b) (4)	(b) (4) Behavioral test room Chemical abbreviations are not permitted. A bottle of ethanol in a Glass Plus bottle was labeled as ETOH	X		Labeling of chemicals: Pre-printed labels have been developed
	An empty bottle of Coffee-mate was being stored in one of the cabinets. The ceiling had loose joint compound.	X		Facility repair being discussed and planned. Container will be disposed of.
	Chemical abbreviations are not permitted. Three bottles of ethanol were labeled as 70% ETOH. Two additional bottles were labeled as PBS	X		Labeling of chemicals: Pre-printed labels have been developed

UNIVERSITY AT ALBANY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE
IACUC Semiannual Program Evaluation
Thursday, November 19, 2015
9:30 am LSRB 1144

IACUC Members:

Name	Role	Present Y/N
B. Parr	Chair	Y
(b) (6)	Scientist	Y
	Non-Affiliated, Non-Scientist	N
	Non-Scientist	N
A. McKenna	Attending Veterinarian	Y
(b) (6)	Scientist	Y

Other Attendees:

Adrienne Bonilla: Asst. VP for Research, UA Compliance Officer

(b) (6)

AGENDA

1. Greetings and Introductions - All
2. Welcome –Asst. VP for Research, A. Bonilla
3. Semiannual Program Review - IACUC Chair Parr, IACUC

A- Review of last program review (May 20, 2015)

B- Semiannual Program Review

Checklist review – Attendees will break into two groups with each group completing one half of the Semiannual review checklist.,

After completion of checklist review, the two groups will reunite; discuss the findings, and document the Semi-Annual Report Summary.

4. Meeting adjourned – 10:30 AM

Findings IACUC Semi-Annual Program Review May 20, 2015

There are no deficiency or concerns reported May 20, 2015 – 2 items listed as suggestion for improvement item.

Deficiency or Suggestion for Improvement	IACUC training
Description	The IACUC member training is still in progress; <i>"Training on how to inspect facilities and labs where animal use or housing occurs (Guide, p 17)."</i>
	C: Suggestion For Improvement
Date Correction or Suggestion Completed	<i>October 2015 Inspections</i> - The Chair distributed a short list of inspection checklist for IACUC facility inspection. The ORRC prepared the list of active protocols and list of animal number/species, and expiration date
Person & Office Responsible for Correction	ORRC/IACUC

Deficiency or Suggestion for Improvement	Other
Description	Members also suggested to seek the information of University policy for personnel security (item 11. <i>Preventive measures in place include pre-employment screening, and physical and IT security (Guide, p 23))</i> to enhance safety for animal use programs and facilities.
	C: Suggestion For Improvement
Date Correction or Suggestion Completed	By next semi-annual Review
Person & Office Responsible for Correction	PI/LAR

5. Euthanasia						A*	M	S	C	NA
• Methods are consistent with AVMA Guidelines on Euthanasia unless approved by the IACUC (<i>Guide, p 123</i>)						X				
• Standardized methods are developed and approved by the veterinarian and IACUC that avoid distress and consider animal age and species (<i>Guide, pp 123-124</i>)						X				
• Training is provided on appropriate methods for each species and considers psychological stress to personnel (<i>Guide, p 124</i>)						X				
• Procedures and training are in place to ensure death is confirmed (<i>Guide, p 124</i>) [must]						X				
6. Drug Storage and Control						A*	M	S	C	NA
• Program complies with federal regulations for human and veterinary drugs(<i>Guide, p 115</i>) [must]						X				
• Drug records and storage procedures are reviewed during facility inspections (<i>Guide, p 115</i>)						X				
• Procedures are in place to ensure analgesics and anesthetics are used within expiration date (<i>Guide, p 122</i>) [must]						X				
• Anesthetics and analgesics are acquired, stored, and their use and disposal are recorded legally and safely (<i>Guide, p 122</i>)						X				

IACUCSEMI-ANNUAL REPORT SUMMARY

FINDINGS

- For each finding or deficiency identified above, provide description, whether Minor or Significant (if deficiency), correct-by date, name of individual and his/her office responsible for making the correction.
- The IACUC (ORRC) will follow up with responsible person for status report by correction due date. Justification will be required if deficiency(ies) are not corrected by the due date.
- Significant deficiencies that are not corrected within the required timeframe must be reported to the appropriate regulatory agency.

Deficiency or Suggestion for Improvement	Description	If Deficiency - Minor or Significant	Correct by Date	Person & Office Responsible for Correction	Date Correction or Suggestion Completed
Suggestion for Improvement	Plans describe preservation of critical or irreplaceable animals (<i>Guide, p 35</i>) - Evacuation procedure may recommend to investigators for irreplaceable animal if applicable.	NA	Next Semi-Annual Meeting	Antigone McKenna (Inform to all animal user by e-mail)	



We have completed the program review and found no deficiencies.

****Signatures on last page ****

II. Endnotes

ⁱ The PHS Policy requires that Assured institutions comply with the regulations (9 CFR, Subchapter A) issued by the U.S. Department of Agriculture (USDA) under the Animal Welfare Act, as applicable. The endnotes below are specific USDA regulatory requirements that differ from or are in addition to the PHS Policy. This list is not intended to be all inclusive. For additional information please refer to 9 CFR Subchapter A - Animal Welfare.

ⁱⁱ Part 2 Subpart C - Research Facilities

- 2.31(b)(2) - "The Committee shall be composed of a Chairman and at least two additional members;... at least one shall not be affiliated in any way with the facility...such person will provide representation for general community interests in the proper care and treatment of animals." [PHS policy requires 5 members]

ⁱⁱⁱ 2.32(c)(4) - "...No facility employee, Committee member, or laboratory personnel shall be discriminated against or be subject to any reprisal for reporting violations of any regulation or standards under the Act." [USDA requirement additional to PHS Policy]

^{iv} 2.31(d)(5) - "...shall conduct continuing reviews of activities...not less than annually." [PHS Policy requires a complete new review every 3 years utilizing all the criteria for initial review]

^v 2.31(d)(1)(x) - "...no animal will be used in more than one major operative procedure from which it is allowed to recover unless...(it is) justified for scientific reasons...(or is) required as routine veterinary procedure...or other special circumstances as determined by the Administrator on an individual basis." [this last point is an additional USDA justification for multiple survival surgeries]

^{vi} 2.36(b)(3) - "...exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the IACUC. A summary of all such exceptions must be attached to the facility's annual report." [Refers to USDA annual report]

^{vii} 2.31(c)(3) - "...Any failure to adhere to the plan and schedule that results in a significant deficiency remaining uncorrected shall be reported in writing within 15 business days by the IACUC, through the institutional official, to APHIS and any Federal agency funding that activity." [PHS Policy requires prompt reporting to OPRR of serious or continuing noncompliance with the PHS Policy or serious deviations from the provisions of the *Guide*]

^{viii} 2.36 - "...each reporting facility shall submit an annual report to the APHIS, AC sector supervisor for the State where the facility is located on or before December 1 of each calendar year." [The USDA annual report has a list of requirements which differ from PHS annual report]

^{ix} In addition to PHS requirements for IACUC review/application for funding, USDA regulations require:

2.31(d)(1)(ii) - "The principal investigator (PI) consider alternatives to procedures that cause more than momentary or slight pain or distress to the animals, and has provided a written narrative description of the methods and sources...used to determine that alternatives were not available."

2.31(d)(1)(iii) - "The PI has provided written assurance that the activities do not unnecessarily duplicate previous experiments."

2.31(d)(1)(iv) - "Procedures that may cause more than momentary or slight pain or distress to the animals will:
- involve in their planning, consultation with the attending veterinarian or his or her designee; [PHS Policy does not specify veterinary consultation]
- not include paralytics without the use of anesthesia;"

2.31(d)(1)(x) - "No animal will be used in more than one major operative procedure from which it is allowed to recover, unless justified for scientific reasons by the principal investigator, in writing..."

^{*} 2.33(a)(1) - "In the case of a part-time attending veterinarian or consultant arrangements, the formal arrangements shall include a written program of veterinary care and regularly scheduled visits to the research facility." [USDA requirement additional]

^{xi} 2.32(c) - "Humane methods of animal maintenance and experimentation, including the basic needs of each species, proper handling and care for the various species of animals used by the facility, proper pre-procedural and post-procedural care of animals, and aseptic surgical methods and procedures."

^{xii} 2.32(c) - additional specifications include:

- "proper use of anesthetics, analgesics, and tranquilizers for any species of animals used by the facility"
- "methods whereby deficiencies in animal care and treatment are reported, including deficiencies in animal care and treatment reported by any employee of the facility..."
- "utilization of services (e.g., National Agricultural Library, National Library of Medicine) to provide information on appropriate animal care and use, alternatives to the use of live animals in research, that could prevent unintended and unnecessary duplication of research involving animals, and regarding the intent and requirements of the Act." [USDA training specifications are more detailed than PHS Policy].

^{xiii} 2.31(d)(iv)(C) - "Procedures that may cause more than momentary or slight pain or distress to the animals will...not include the use of paralytics without anesthesia."

IACUCSEMI-ANNUAL REPORT

November 19, 2015

☐

We have completed the program review and found no deficiencies.

Note: Please check the box above ONLY if all items were found to be "Acceptable" on the checklist.

Signature: All members conducting this program review must sign below.

Brian Parr

(b) (6)

Antigone McKenna

(b) (6)

(b) (6)



TO: Institutional Animal Care and Use Committee
(b) (6)
FROM: Adrienne D. Bonilla, Asst. VP for Research
RE: IACUC Semi-Annual Report
Reporting Period: Sept 1, 2015 – Feb 29, 2016

Attached is the IACUC Semi-Annual Report to the Vice President for Research on the University's Animal Care and Use Program. Please review, and sign at the bottom.

- 10/28/15 IACUC Inspection of East Campus Laboratory Animal Facility
- 10/29/15 IACUC Inspection of Main Campus Laboratory Animal Facility
- 11/19/15 IACUC Semi-Annual Review UAlbany Animal Care and Use Program

I have read the report and I, _____

(Printed Name)

Approve:

(b) (6)

(Member Signature)

Disapprove: (Comments below)

(Member Signature)

COMMENTS:

Thank you!



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I have read the report and I, _____,

(Printed Name)

Approve: _____

_____ (b) (6)

Disapprove: (Comments below)

(Member Signature)

COMMENTS:

Thank you!



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(Printed Name)

Approve:

(Member Signature)

Disapprove: (Comments below)

(Member Signature)

COMMENTS:

Thank you!



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I have read the report and I, Antigone McKenna,
(Printed Name)

Approve:

(b) (6)

Disapprove: (Comments below)

(Member Signature)

COMMENTS:

Thank you!



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I have read the report and I, Brian Parr
(Printed Name)

Approve:

(b) (6)

(Member Signature)

Disapprove: (Comments below)

(Member Signature)

COMMENTS:

Thank you!



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Approve:

(b) (6)

Disapprove: (Comments below)

(Member Signature)

COMMENTS:

Thank you!