VIII. Membership of the IACUC

Date: 08/01/2017				
Name of Institution: Lo	ouisiana State Unive	rsity Health S	ciences Ce	nter Shreveport
Assurance Number: A	3095-01			
IACUC Chairperson	·			
Name*: Matthew Woola				
Title*: Associate Profes Virology, and Immunol Address*: (street, city,	ogy	Microbiology,	Degree/0	Credentials*: PhD
1501 Kings Highway Shreveport, LA 71103				
E-mail*: mwoola@lsuh:	sc.edu			
Phone: (b) (6)	Fax*:		(b) (6)
IACUC Roster	- Audie Williams			
Name of Member/ Code**	Degree/ Credentials	Position Tit	ie***	PHS Policy Membership Requirements****
V. Hugh Price, Jr.	DVM	Director, A Resources Attending	and	Veterinarian, Voting
			(Veterinarian, Voting
				Ex-officio, Non-voting
				Scientist, Voting
				Non-affiliated, Voting
				Non-scientist/Non-affiliated, Voting
				Scientist, Voting
				Non-scientist/Non-affiliated, Voting
				Scientist, Voting
				Ex-Officio, Non-voting
				Scientist, Voting

(b) (6) Ex-officio, Non-voting
Scientist, Voting
Scientist, Voting
Ex-officio, Non-voting
Scientist, Voting

^{*} This information is mandatory.

**** PHS Policy Membership Requirements:

Veterinarian veterinarian with training or experience in laboratory animal science and medicine or in

the use of the species at the institution, who has direct or delegated program authority

and responsibility for activities involving animals at the institution.

Scientist Nonscientist practicing scientist experienced in research involving animals.

member whose primary concerns are in a nonscientific area (e.g., ethicist, lawyer,

member of the clergy).

Nonaffiliated

individual who is not affiliated with the institution in any way other than as a member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user. A consulting veterinarian may not be considered nonaffiliated.

[Note: all members must be appointed by the CEO (or individual with specific written delegation to appoint members) and must be voting members. Non-voting members and alternate members must be so identified.]

^{**} Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this submission to OLAW. Sufficient information to determine that all appointees are appropriately qualified must be provided and the identity of each member must be readily ascertainable by the institution and available to authorized OLAW or other PHS representatives upon request.

^{***} List specific position titles for all members, including nonaffiliated (e.g., banker, teacher, volunteer fireman; not "community member" or "retired").

X. Facility and Species Inventory

Date: 08/01/2017				
Name of Institution:	Lo	uisiana State Unive	rsity Health Sciences Center Shre	veport
Assurance Number:	A30	95-01		
Laboratory, Unit, or Building*		Gross Square Feet [include service areas]	Species Housed [use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog]	Approximate Average Daily Inventory
	(b) (4)	21,282.30 sq.ft.	mice	6575
			rats	595
			rabbits	**
		12,138.90 sq.ft.	mice	4168
		5,400 sq.ft.		
		9 acres (fenced pasture)		
		1,500 sq.ft. (storage only)		

^{*}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.

^{**}There is one animal protocol that utilizes rabbits. Forty rabbits were approved on the protocol. At the time of this report, 27 had been used and 13 remain. There are no rabbits currently being housed in the facility, and there is no indication when the remaining 13 will be used.