

## Annual Report to OLAW

Institution: The Scripps Research Institute
Assurance Number: D16-001222 (A3194-01)
Reporting Period: January 01, 2019 through December 31, 2019

This institution's Institutional Animal Care and Use Committee (IACUC), through the Institutional Official, provides this annual report to the Office of Laboratory Animal Welfare (OLAW).

### I. Program Changes *[Select A or B]*

- ☒ A. There have been **no changes** in this institution's program for animal care and use as described in the Assurance. *[Skip to Item II.]*
- ☐ B. Change(s) in this institution's program for animal care and use as described in the Assurance have occurred during this reporting period. *(FAQ 6)*

Select all that apply:

- ☐ This institution's AAALAC accreditation status has changed *(PHS Policy IV.A.2.)*.
- ☐ AAALAC Accredited – Category 1
- ☐ Non-Accredited – Category 2
- ☐ This institution's program for animal care and use has changed *(PHS Policy IV.A.1.a-i.)*.  
*[Attach a full description of the changes.]*
- ☐ The individual designated by this institution as the Institutional Official has changed.  
*[Provide name, title(s), address, e-mail, phone, and fax numbers in Item V.]*
- ☐ The membership of this institution's IACUC has changed. *[Provide current roster of members in Item VI.]*

### II. Semiannual Evaluations

This IACUC has conducted semiannual evaluations of the institution's program and inspections of the institution's facilities (including satellite facilities) on the dates below. Reports of the evaluations and inspections have been submitted to the Institutional Official. The reports include any IACUC-approved departures from the *Guide* with a reason for each departure, any deficiencies (significant or minor) that were identified, and a plan and schedule for correction of each deficiency. *[Do not provide semiannual reports unless they include a minority view.]*

#### A. Program Evaluations

*[Two dates (month/day/year) must be provided to satisfy the PHS Policy requirement that evaluations be done at 6 month intervals. If the IACUC conducted more than 2 evaluations of the program during the reporting period, please attach a list showing the dates.]*

Date 1: May 15, 2019	Date 2: November 20, 2019
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**B. Facility Inspections**

*[Two dates (month/day/year) must be provided to satisfy the PHS Policy requirement that facility inspections be done at 6 month intervals. If the IACUC conducted more than 2 inspections of each site during the reporting period, please attach a list showing the dates.]*

Date 1: May 15, 2019

Date 2: November 20, 2019

**III. Minority Views** *[Select A or B]*

- ☒ A. There were **no minority** views during this reporting cycle.
- ☐ B. Any minority views submitted by members of the IACUC regarding reports filed under PHS Policy IV.F. for this reporting cycle are attached.

**IV. Signatures**

IACUC Chairperson	Institutional Official
Name: Juan Carlos de la Torre, Ph.D.	Name: Matthew Tremblay, Ph.D.
(b) (6)	(b) (6)
Signature:	Signature:
Date: January 16, 2020	Date: 1/16/20

**V. Change in Institutional Official**

Name:	
Title:	Degree/Credential:
Name of Institution:	
Address: <i>[street, city, state, zip code]</i>	
E-mail:	
Phone:	Fax: