# Annual Report to OLAW

Institution: University of Texas at Arlington
Assurance Number: A3169.01
Reporting Period: January 1, 2019 – 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 B1
		a	00,000,1	U, D

- [ ] 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.]
- [ X ] 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 i	nstitution's AAALAC accreditation status has changed (PHS Policy IV.A.2.).
		[ ]	AAALAC Accredited – Category 1
		[ ]	Non-Accredited – Category 2
-	]		nstitution's program for animal care and use has changed ( <u>PHS Policy IV.A.1.a-i.)</u> The hand full description of the changes.

- [ X ] 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.]
- [ X ] 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: February 13, 2019	Date 2: July 10, 2019		
Date 3: December 11, 2019			

## **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: February 13, 2019	Date 2: July 10, 2019			
Date 3: December 11, 2019				

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

- [X] 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: Michael Roner, Ph.D.	Name: James P. Grover, Ph.D.		
(b) (6) Signature	(b) (6) Signatur∈		
Date: 1/13/2020	Date: 1/14/2020		

# **Change in Institutional Official**

Name: Jame	es P. Grover, Ph.D.			
Title: Interin	n Vice President for Research	Degree/C	redential: Ph.D.	
	titution: University of Texas at			
Address: 70 Box 19162 Arlington, T	1 S. Nedderman St.,			
E-mail: grov	ver@uta.edu			
Phone:	(b) (6)	Fax:	(b) (6);	

## **VI.** Change in IACUC Membership [Current roster]

Roster attached.

Institution:						
IACUC Contact Information						
Address: [street, city, state, zip code]						
E-mail:						
Phone:			Fax:			
			Tax.			
IACUC Chairperson Name:						
Title:			Degree/Credentials:			
PHS Policy Membership I	Poquiromonto***		Degree/Credentials.			
IACUC Roster [Provide						
TACUC RUSTEI [PIOVIGE						
Name of Member/ Code*	Degree/ Credential	Position Title/ Occupational Background**		PHS Policy Membership Requirements***		

<sup>\*</sup> Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this report 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.

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 practicing scientist experienced in research involving animals.

Nonscientist member whose primary concerns are in a nonscientific area (for example,

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.]

<sup>\*\*</sup> List specific position titles for all members, including nonaffiliated (e.g., banker, teacher, volunteer fireman; not "community member" or "retired").

<sup>\*\*\*</sup> PHS Policy Membership Requirements:

# IACUC Membership Roster 2019-2020

NAME	POSITION TITLE	DEGREE / CREDENTIAL	PHS POLICY MEMBERSH IP REQUIREME NT	PHONE / FAX NUMBER	ADDRESS	E-MAIL
Dr. Michael Roner	Associate Professor, Biology	Ph.D.	IACUC Chairperson / Scientist	(b) (d)	Box 19498 Arlington, TX 76019	<u>iacuchair@uta.edu</u>
		(b) (б	IACUC Vice Chair / Scientist			(Б) (б)
Dr. Stephanie Lewis	Attending Veterinarian	DVM	Attending Veterinarian	(b) (6)	UTSW Medical Center, LSRB (JA Bldg), 4 <sup>th</sup> Floor (b) (4) 5323 Harry Hines Blvd, Dallas TX 75390	stephanie.lewis@utsout hwestern.edu
		(b) (6)	Scientist			(b) (6)
			Community Member / Non- Affiliated			
			Scientist			

