

Annual Report to OLAW

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| Institution: University of New Hampshire |
| Assurance Number: D16-00267 |
| Reporting Period: 1/1/2019 ~ 12/31/2019 |

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.]

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|------------------------|-------------------------|
| Date 1: March 18, 2019 | Date 2: October 3, 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: March 5 - 28, 2019

Date 2: September 5 - 30, 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: Rebecca Rowe, Ph.D. | Name: Louise Griffin |
| Signature: (b) (6) | Signature (b) (6) |
| Date: 2/20/20 | Date: 3/3/20 |

V. Change in Institutional Official

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|--|------------------------|
| Name: Louise Griffin | |
| Title: Senior Director for Research | Degree/Credential: MBA |
| Name of Institution: University of New Hampshire | |
| Address: [street, city, state, zip code] Thompson Hall 105 Main St Durham, NH 03824 | |
| E-mail: louise.griffin@unh.edu | |
| Phone: (b) (6) | Fax: |

VI. Change in IACUC Membership [Current roster]

| Institution: University of New Hampshire | | | |
|---|------------------------|---|---|
| IACUC Contact Information | | | |
| Julie Simpson, Director Research Integrity Services University of New Hampshire 51 College Road, (b) (4) Durham, NH 03824 | | | |
| E-mail: Julie.simpson@unh.edu | | | |
| Phone: (b) (6) | | Fax: (b) (6) | |
| IACUC Chairperson | | | |
| Name: Rebecca Rowe | | | |
| Title: Associate Professor, NREN | | Degree/Credentials: Ph.D. | |
| PHS Policy Membership Requirements***: Scientist | | | |
| IACUC Roster [Provide below or attach] | | | |
| Name of Member/ Code* | Degree/ Credentials | Position Title** | PHS Policy Membership Requirements*** |
| (b) (6) | | | S |
| | | | S |
| | | | S |
| Dean Elder | M.S., D.V.M. | Director, Animal Resources Office, UNH | V |
| (b) (6) | | | NA |
| | | | S |
| | | | S |
| | | | NS |
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| *NV Julie Simpson | Ph.D. | Director, Research Integrity Services | |
| (b) (6) | | | |

* 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.

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

*** PHS Policy Membership Requirements:

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|----------------------|---|
| 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 | 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.]

This institution's program for animal care and use has changed (PHS Policy IV.A.1.a-i.). [See full description below.]

III.D.6. Addition of Designated Member Review (DMR) process for the review of renewals of instructional protocols.

Application(s) scheduled for review by Full Committee Review (FCR) at the next IACUC meeting or proposed for DMR (renewals of instructional protocols) are sent to each member at least 5 working days prior to the meeting. For renewals of instructional protocols, the DMR process is: IACUC members are provided access to applications and polled as to whether they agree to DMR. All members have until midnight three business days following the request. Members who do not respond by the end of the three business day period are deemed to have agreed to DMR. After three business days have past, the DMR process will involve a minimum of one ARO veterinarian and one IACUC member who is a species expert appropriate for the proposed animal use. Both will be appointed by the Chair, and the Chair may also appoint other members as DMR members on a protocol-by-protocol basis.

III.D.6. Addition of type of DMR subsequent to FCR to review required modifications in to secure approval.

The IACUC has a written policy regarding the use of DMR subsequent to FCR to which all members have agreed in advance in writing. These procedures may be in effect only when every IACUC member consents to their use in advance in writing. The IACUC DMR process subsequent to FCR is: When substantive information is lacking from a protocol or the protocol requires substantive modification to secure approval, members present at a duly convened IACUC meeting, with a quorum of IACUC members present and voting, may decide by unanimous vote to use a DMR (ARO Veterinarian or Subcommittee) subsequent to a full committee review to review the revised protocol and grant approval. At the time of the vote, the type of DMR will be identified and when utilizing a Subcommittee, the IACUC Chair will select at least three qualified members to serve as members of the Subcommittee. The type of DMR will be documented in the IACUC meeting minutes, as will subcommittee members. RISCO coordinates the DMR process. Upon receipt of the revised protocol from the principal investigator/instructor, the RISCO distributes it to ARO Veterinarian or the Subcommittee members. All Subcommittee members will review identical copies of the protocol. Each Subcommittee member reviews the revisions and communicates his/her response to the RISCO. There are three outcomes of a Subcommittee review: approve, require modification to secure approval, or refer to full IACUC review. The RISCO copies the communication to the other Subcommittee members and communicates with the project director. Subcommittee members need to be unanimous in their decision to approve the revised protocol or to request further modifications to secure approval. The approval date for the protocol is the date that the ARO Veterinarian or the last designated Subcommittee member(s) approved the revised protocol. Subcommittee members do not need to be unanimous in a decision to refer the revised protocol back to the full IACUC for review. Any member of the IACUC may, at any time, request to see the revised protocol and/or request full committee review of the protocol.

III.D.7. Change in Review of Modification Requests, including Addition of VVC process.

Review and approve, require modifications in (to secure approval), or withhold approval of proposed significant changes regarding animal use in ongoing activities as set forth in the PHS Policy at IV.C. Proposed amendments/modifications to an activity that has been reviewed and approved by the IACUC may fall into two categories: Review by the IACUC by FCR or review administratively via a Veterinary Verification and Consultation (VVC) process.

The IACUC review process for changes by FCR is as described in III.D.6 above. These are requests for significant changes that do not qualify for review by VVC. These may include, but are not limited to, the following:

- a. *Change in Principal Investigator/Instructor*
- b. *Changes in surgical techniques*
- c. *Change from nonsurvival to survival surgery*

- d. *Changes in experimental design*
- e. *Changes that result in greater pain or distress, or degree of invasiveness (regardless of whether there is a change in the pain or distress category)*
- f. *Addition of, or change in, species*
- g. *Additional animals for species regulated by the USDA*
- h. *Changes in housing or use of animals in a location that is not part of the animal program overseen by the IACUC*
- i. *Changes in disposition of animals at the end of the project, or*
- j. *Changes that impact personnel safety.*

These requests must be reviewed by the IACUC at a convened meeting (FCR). Significant changes in study objectives or design require submission of a new application to the IACUC. The IACUC limits the number of modifications that may be requested for a single protocol to two. Principal investigators/instructors who want to modify an approved protocol but who have reached the modification limit for that protocol must submit a new application to the IACUC for review. Modifications submitted that exceed the limit for a protocol will be returned to the requestor with a request to submit a new application.

The IACUC has reviewed and approved a written policy of VVC; the ARO Veterinarian(s) have been designated by the IACUC to conduct the verification and consultation; and the verification and consultation by the ARO Veterinarians is documented.

The review process for changes by VVC is as follows: An ARO Veterinarian will determine if a requested change meets the criteria described below for VVC review. If so, the requested change to an IACUC-approved protocol will be reviewed and approved by an ARO Veterinarian. The Veterinarian is not conducting DMR but is serving as a subject matter expert to verify that compliance with the IACUC-reviewed and -approved policy is appropriate for the animals in this circumstance. The Veterinarian will retain the discretion to send any requested change to the IACUC for FCR as appropriate. All changes approved by VVC will be reported to the IACUC at the next convened meeting.

VVC Criteria

Changes within the following categories MAY be approved by VVC (providing they meet defined criteria):

1. **Anesthesia, Analgesia, Sedation, or Experimental Substances**
 Changes in agents administered to animals may be approved by VVC provided that:
 - a. The change qualifies for VVC review;
 - b. Changes in anesthesia, analgesia and sedation are per veterinarian recommendation;
 - c. Changes in experimental substance administration are only to substitute equivalent agents at established safe dosages for the species.
2. **Euthanasia**
 Changes in the method of euthanasia may be approved by VVC provided that:
 - a. The change qualifies for VVC review;
 - b. The proposed new method of euthanasia is in accordance with the AVMA Guidelines for the Euthanasia of Animals, 2020.
3. **Experimental Procedures**
 Changes in the duration, frequency, type, or number of experimental procedures may be approved by VVC provided that:
 - a. The change qualifies for VVC review;
 - b. Changes in experimental procedures are only to substitute procedures that should be equivalent to approved procedures and/or improve animal well-being and/or improve the value of the data collected.
4. **Additional Animals**

Requests to add additional animals to an approved protocol may be approved by VVC provided that:

- a. The change qualifies for VVC review;
- b. The species involved is not regulated by the USDA.

5. **Housing Location**

Requests to house animals (> 12 hours) in facilities other than those run by the ARO (i.e., Conant Hall or Rudman Hall) may be approved by VVC provided that:

- a. The change qualifies for VVC review;
- b. The change does not involve a species regulated by the USDA;
- c. The space meets the minimum requirements for the species as described in the Guide for the Care and Use of Laboratory Animals, 8th Ed.

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