

VIII. Membership of the IACUC

| Date: 07/01/2019 | | | |
|--|------------------------|---|---|
| Name of Institution: University of South Alabama | | | |
| Assurance Number: A3288-01 | | | |
| IACUC Chairperson | | | |
| Name*: Natalie Bauer | | | |
| Title*: Associate Professor, Dept. of Pharmacology | | Degree/Credentials*: Ph.D. | |
| Address*: (street, city, state, zip code) | | | |
| University of South Alabama College of Medicine 2015 Medical Sciences Building, (b) (4) Mobile, AL 36688-0002 | | | |
| E-mail*: nbauer@southalabama.edu | | | |
| Phone*: (b) (6) | | Fax*: (b) (6) | |
| IACUC Roster | | | |
| Name of Member/ Code** | Degree/ Credentials | Position Title*** | PHS Policy Membership Requirements**** |
| Natalie Bauer | Ph.D. (Chair) | Associate Professor, Dept. of Pharmacology | Scientist, voting member |
| (b) (6) | | | Scientist, voting member |
| Michele Schuler | D.V.M., Ph.D. | Director of University Biological Resources, Associate Professor, Dept. of Comparative Medicine | Veterinarian, voting member |
| (b) (6) | | | Non-scientist, non-affiliated, voting member |
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| (b) (6) | | | Scientist, voting member |
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|--------------------|--|
| (b) (6) | Scientist, voting member |
| | Scientist, voting member |
| | Scientist, voting member |
| | Scientist, voting member |
| | Scientist, voting member |
| Non-voting members | |
| (b) (6) | IACUC Administrator, non-voting member |
| | Consultant, non-voting member |

* This information is mandatory.

** 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").

**** PHS Policy Membership Requirements:

| | |
|----------------------|---|
| <i>Veterinarian</i> | 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. |
| <i>Scientist</i> | practicing scientist experienced in research involving animals. |
| <i>Nonscientist</i> | member whose primary concerns are in a nonscientific area (e.g., ethicist, lawyer, member of the clergy). |
| <i>Nonaffiliated</i> | 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.]

(b) (4)

X. Facility and Species Inventory

[illegible]

*Institutions may identify animal areas in any manner, e.g., initials or ID number. However, the name and location must be provided to OLAW upon request.



UNIVERSITY OF SOUTH ALABAMA

Memorandum to: Lynne U. Chronister
Vice President for Research and Economic Development

From: Institutional Animal Care and Use Committee

Subject: Semiannual Report of the Program Review and Facility Inspection

Date: November 21, 2019

This report summarizes the IACUC's results of its most recent program review and facility inspection, as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals ([Policy](#)), Section [IV.B.1.-3.](#), the *Guide for the Care and Use of Laboratory Animals* ([Guide](#)), and the Animal Welfare Act ([AWA](#)) regulations, as applicable. Submission of semiannual reports to the Institutional Official is a condition of this institution's Animal Welfare Assurance with the NIH Office of Laboratory Animal Welfare (OLAW).

Since the last review, the following changes have occurred in the institution's program for animal care and use (PHS Policy [IV.A.1.a.-i.](#)): [optional]

I. Description of the Nature and Extent of the Institution's Adherence to the PHS Policy, the *Guide*, and the AWA

Departures from the PHS Policy, the *Guide*, and the AWA.

Select A or B:

- ☒ **A. There were no departures during this reporting period.**
- ☐ **B. The following departures have been reviewed and approved by the IACUC:** [include reason for each departure]

II. Deficiencies in the Institution's Animal Care and Use Program

A. Animal Care and Use Program Review Date(s):

Select 1 or 2:

- ☐ 1. There were no deficiencies in the program during this reporting period.
- ☒ 2. The following deficiencies have been identified:

B. Program Review Findings:

1. The sub-committee determined there needs to be a Field Studies Fact Sheet on the IACUC website. This fact sheet will serve as resource guide for field research.
2. The sub-committee noted concerns with regard to the post approval monitoring process. The primary concern regarded the methods used for tagging and sharing monitoring protocols. Dr. Schuler and (b) (6) met on Monday, September 16, 2019, to discuss the process of handling monitoring in a conducive manner.
3. The sub-committee discussed the issue of designated sinks, located on the 2nd floor of the Medical Sciences Building (MSB). It was determined that the sinks should be capped. It was also determined that Gavin Guy would handle the capping of the sinks, and submit a report to the IACUC chair. The Chair will present the findings to the IACUC committee at the 11/21/19 meeting.

4. The sub-committee discussed the multiple failings of the HVAC system, located in the Vivarium. None of the HVAC failures resulted in harm to the animals. Also temperatures were maintained by Vivarium personnel moving in portable HVAC units. The course of action is to continue monitoring and report system failures to the Chair & Institutional Official (IO). If the situation becomes critical, and no external funding is provided, then the Chair, Vice-Chair, and Attending Veterinarian will meet with the Institutional Official (IO) to discuss.
5. The sub-committee reviewed the IACUC's required training and determined that training was sufficient. It was noted that additional training was initiated by the Department of Comparative Medicine (DCM) and designated staff/personnel attended AALAS seminars and OSHA conference on Veterinarian Practice.

III. Deficiencies in the Institution's Animal Facility

Animal Facility Inspection Date(s): **October 25, 2019 and October 30, 2019**

Select A or B:

- ☐ A. There were no deficiencies in the animal facility during this reporting period.
- ☒ B. **The following deficiencies have been identified:**

The table below summarizes all deficiencies and deadlines for corrective action

| Date | Deficiency Category (M or S) | Location | Deficiency and Corrective Action Plan | Responsible Party | Correction Deadline & Interim Status | Completion Date |
|------------|------------------------------|----------|--|-------------------|--------------------------------------|-----------------|
| 10/30/2019 | M | (b) (4) | <ul style="list-style-type: none"> Sharps containers not in every room. (b) (4) abandoned equipment along with hazardous waste Cold sterilization was not dated or expired. It was recommended one cull female should be added to a sentinel, to reduce stereotypical behaviors. An open cage in rat room (b) (4) For AAV infected mice, protocols need to be confirmed with IBC Safety Committee. Inappropriate signage in room (b) (4) A bottle of artificial tears was expired. Personnel should always check before beginning experiments. | M. Schuler | 11/12/2019 | 11/07/2019 |
| 10/25/2019 | M | (b) (4) | <ul style="list-style-type: none"> No deficiencies noted at the LID. | M. Schuler | | |

IV. Deficiencies in the Institution's Research Laboratories

Research Laboratory Inspection Date(s): **10/28/2019-11/01/2019**

Select A or B:

- ☐ A. There were no deficiencies in the animal facility during this reporting period.
- ☒ B. **The following deficiencies have been identified:**

The table below summarizes all deficiencies and deadlines for corrective action

| Date | Deficiency Category (M or S) | Location | Deficiency and Corrective Action Plan | Responsible Party | Response Deadline & Interim Status | Completion Date |
|------|------------------------------|----------|---------------------------------------|-------------------|------------------------------------|-----------------|
|------|------------------------------|----------|---------------------------------------|-------------------|------------------------------------|-----------------|

| | | | | | | |
|------------|---|---------|--|---------|------------|------------|
| 10/28/2019 | M | (b) (4) | • Signage directing laboratory personnel to the nearest eyewash station missing. | (b) (6) | 11/11/2019 | 11/04/2019 |
| 10/28/2019 | M | | • Expired personnel training record | | 11/11/2019 | 11/01/2019 |
| 10/28/2019 | M | | • Expired personnel training record | | 11/11/2019 | 10/28/2019 |
| 10/31/2019 | M | | • Personnel with expired training. | | 11/15/2019 | 11/20/2019 |
| 11/01/2019 | M | | • Personnel with expired training. | | 11/14/2019 | 11/18/2019 |
| 11/01/2019 | M | | • Signage directing laboratory personnel to the nearest eyewash station missing | | 11/14/2019 | 11/04/2019 |
| 11/01/2019 | M | | • Signage directing laboratory personnel to the nearest eyewash station missing. | | 11/16/2019 | 11/06/2019 |
| 11/01/2019 | M | | • Signage directing laboratory personnel to the nearest eyewash station missing. | | 11/16/2019 | 11/18/2019 |

V. Minority Views

Select A or B:

- ☐ A. No minority views were submitted or expressed.
- ☒ B. The following minority views were expressed: *[insert minority views here or attach]*
Please see the attached document regarding a 2019 Minority View.

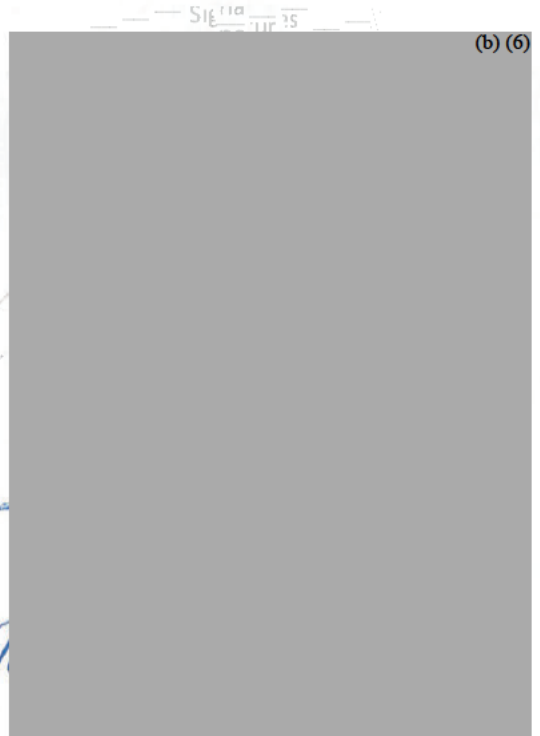
VI. Status of AAALAC Accreditation

College of Medicine,
University of South Alabama
00958 Since 1999

VII. Signatures [signatures of a majority of the IACUC members]


 (b) (6)

 (b) (6)

 (b) (6)

VIII. Institutional Official Signature

 (b) (6)

Lynne U. Chronister

Date

11/22/19

Vice President for Research and Economic Development

Signature of Institutional Official

Please return signed original to the IACUC Office.