

From: [Gibbens, Robert - APHIS](#)
To: [Hovancsak, Catherine F - APHIS](#); [Tanya A - APHIS Tims \(tanya.a.tims@usda.gov\)](#)
Subject: FW: OLAW Case A3564-H
Date: Wednesday, May 27, 2020 9:52:00 AM
Attachments: [SIGNED Compliance Letter University of Wisconsin Oshkosh H.pdf](#)

fyi

From: Walker, Keri (NIH/OD) [C] [mailto:keri.walker@nih.gov]
Sent: Wednesday, May 27, 2020 7:18 AM
To: koker@uwosh.edu
Cc: (b) (6) Gibbens, Robert - APHIS <robert.m.gibbens@usda.gov>
Subject: OLAW Case A3564-H

Dear Dr. Koker,

Attached please find Dr. Tubbs' final response to OLAW Case A3564-H.

If you have any questions, feel free to contact us by phone or by e-mail.

Best Regards,
Keri

*Keri Walker
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DEPARTMENT OF HEALTH & HUMAN SERVICES

PUBLIC HEALTH SERVICE
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FOR US POSTAL SERVICE DELIVERY:

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May 26, 2020

Re: Animal Welfare Assurance
A3564-01 [OLAW Case H]

Dr. Joh Koker
Interim Provost and Vice Chancellor
University of Wisconsin-Oshkosh
800 Algoma Boulevard
Oshkosh, WI 54901-8622

Dear Dr. Koker,

The Office of Laboratory Animal Welfare (OLAW) acknowledges receipt of your May 20, 2020 letter reporting an instance of noncompliance with the PHS Policy on Humane Care and Use of Laboratory Animals at the University of Wisconsin Oshkosh following up on an initial April 20, 2020 notification by email.

According to the information provided, this Office understands that the University of Wisconsin Oshkosh Animal Care and Use Committee (ACUC) determined that instances of noncompliance occurred with respect to: failure to adhere to IACUC-approved protocol. The final report states on March 30, 2020, a gerbil was anesthetized by the Principal Investigator (PI) to perform IP infection of *Brugia malayi* and ear punching as approved per IACUC protocol. The gerbil was anesthetized using a tabletop laboratory animal anesthesia system with a rodent induction box. Following the ear punch and prior to the IP infection procedure, the PI noticed that the gerbil was not breathing. Thermal support and chest compressions were provided by the PI, but the animal did not revive. Next, the PI notified the Laboratory Animal Manager of the incident and voiced difficulty using the anesthesia machine. The investigator was instructed to complete an unexpected event form and was provided refresher training on March 31, 2020 via videoconference on how to properly use the anesthesia equipment. The Laboratory Manager reviewed the anesthesia monitoring log and the record keeping requirements in the surgery room. They determined the anesthesia monitoring log was not completed for the procedure on March 30, 2020. Per the final report, the study protocol refers to following SOP#11 for anesthesia procedures and record-keeping. Therefore, it was determined that the PI failed to adhere to the IACUC-approved protocol.

On April 15, 2020, a subcommittee of the IACUC met to discuss the event, and confirmed the PI was up to date for training for surgery and anesthesia procedures. The subcommittee discussed that it is a best practice to have at least two people present when doing procedures involving anesthesia. After discussion, the subcommittee recommended modifying SOP #11 to state "An assistant must be present" as opposed to "should". The revised SOP #11 was presented to the IACUC at the May 14, 2020 meeting and approved as presented. The unexpected event was discussed by the full committee as well. In addition to the refresher training that has been provided, the updated SOP#11 was shared with the PI and lab for review. It is noted that additional training on the SomnoSuite anesthesia system will be scheduled with the PI prior to the next procedure. A recommendation was made for the lab to wait to perform procedures involving anesthesia until the campus returns to normal operations (post COVID-19 reduced operations) or until a minimum of two lab members can be present to assist with anesthesia, animal monitoring, and record keeping. The report states the lab plans to voluntarily pause animal procedures during the COVID-19 reduced operations campus closure.

It is noted that this research is supported by PHS funds. Based on its assessment of this explanation, OLAW understands that the University of Wisconsin Oshkosh has implemented appropriate measures to correct and prevent recurrences of these problems and is now compliant with provisions of the PHS Policy. We appreciate being informed of these matters and find no cause for further action by this Office.

Sincerely,

Jacquelyn T.
Tubbs -S

Digitally signed by
Jacquelyn T. Tubbs -S
Date: 2020.05.27 08:28:12
-04'00'

Jacquelyn T. Tubbs, DVM
Animal Welfare Program Specialist
Division of Compliance Oversight
Office of Laboratory Animal Welfare

cc: IACUC Contact

Robert M. Gibbens, DVM, Director, Animal Welfare Operations