

## VIII. Membership of the IACUC

Date: <b>April 1, 2019</b>			
Name of Institution: <b>The University of Texas Rio Grande Valley</b>			
Assurance Number: <b>A-4730-01</b>			
<b>IACUC Chairperson</b>			
Name*: <b>Dr. Christopher Vitek</b>			
Title*: <b>Associate Professor, Biology</b>		Degree/Credentials*: <b>Ph.D., Scientist</b>	
Address*: (street, city, state, zip code)  <b>1201 West University Blvd Brownsville, TX 78520</b>			
E-mail*: <b>Christopher.vitek@utrgv.edu</b>			
Phone*: (b) (6)		Fax*: <b>N/A</b>	
<b>IACUC Roster</b>			
Name of Member/ Code**	Degree/ Credentials	Position Title***	PHS Policy Membership Requirements****
<b>Dr. Christopher Vitek</b>	<b>Ph.D.</b>	<b>Associate Professor, Biology, Chair of the IACUC</b>	<b>Scientist</b>
<b>Dr. Sander Hacker</b>	<b>VDM</b>	<b>Veterinarian</b>	<b>Veterinarian</b>
(b) (6)			<b>Scientist</b>
			<b>Alternate Veterinarian (non-voting if the AV is present at convened meeting, voting if the AV is not present at convened meeting)</b>
<b>*Ms. Cordelia Rasa</b>	<b>Master of Science, SRS, RLATG, CMAR</b>	<b>Director-Laboratory Animal Resources</b>	<b>Ex-officio Member, Voting member</b>
(b) (6)			<b>Scientist</b>
			<b>Scientist</b>
			<b>Non-Scientist (administration), Non-Affiliated</b>

(b) (6)	<b>Ex-officio Member, Non-voting member</b>
	<b>Ex-officio Member, Non-voting member</b>
	<b>Ex-officio Member, Non-voting member</b>
	<b>Non-Scientist, Non-Affiliated</b>
	<b>Scientist</b>
	<b>Ex-officio Member, Non-voting member</b>

**\* 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.]*

## X. Facility and Species Inventory

Date: <b>April 1, 2019</b>			
Name of Institution: <b>The University of Texas Rio Grande Valley</b>			
Assurance Number: <b>A-4730-01</b>			
Laboratory, Unit, or Building*	Gross Square Feet [ <i>include service areas</i> ]	Species Housed [ <i>use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog</i> ]	Approximate Average Daily Inventory
(b) (4)	<b>333 SF</b>	<b>Monodelphis Opossums</b>	<b>700</b>
	<b>204 SF</b>	<b>Monodelphis Opossums</b>	<b>400</b>
	<b>204 SF</b>	<b>Mice</b>	<b>87</b>
	<b>234 SF</b>	<b>Goldfish</b>	<b>70</b>
	<b>204 SF</b>	<b>Mice</b>	<b>64</b>
	<b>204 SF</b>	<b>Rats</b>	<b>36</b>
	<b>181 SF</b>	<b>Snakes</b>	<b>40</b>
		<b>Turtles</b>	<b>5</b>
		<b>Lizard</b>	<b>1</b>
	<b>584 SF</b>	<b>Snapping Turtle</b>	<b>1</b>
		<b>Pond Turtles</b>	<b>3</b>
		<b>Mud/Musk Turtle</b>	<b>1</b>
	<b>129 SF</b>	<b>Tilapia</b>	<b>4</b>
	<b>156 SF</b>	<b>Zebra Fish</b>	<b>10</b>
	<b>3168 SF</b>	<b>Grey Triggerfish</b>	<b>1</b>
		<b>White Grunt</b>	<b>2</b>
		<b>Pinfish</b>	<b>4</b>
		<b>Spotted Scorpionfish</b>	<b>4</b>
		<b>Oyster Toadfish</b>	<b>3</b>
		<b>Jeweled Moray</b>	<b>1</b>
		<b>Purple Sea Urchin</b>	<b>6</b>
		<b>Horse Conch</b>	<b>2</b>
		<b>Thinstripe Hermit Crab</b>	<b>22</b>
		<b>Channel Catfish</b>	<b>1</b>
		<b>Sheepshead</b>	<b>1</b>
		<b>Lookdown</b>	<b>1</b>
		<b>White Grunt</b>	<b>2</b>

(b) (4)		<b>Lane Snapper</b>	<b>1</b>
		<b>Fringed Filefish</b>	<b>1</b>
		<b>Sea Cucumber</b>	<b>1</b>
		<b>Grey Sea Star</b>	<b>2</b>
		<b>Mantis Shrimp</b>	<b>1</b>
		<b>Cross-Barred Venus</b>	<b>2</b>
		<b>Hairy Blenny</b>	<b>3</b>
		<b>Green/Striped Sea Cucumber</b>	<b>3</b>
		<b>Grey/Mangrove Snapper</b>	<b>1</b>
		<b>Giant Eastern Murex</b>	<b>1</b>
		<b>Lightning Whelk</b>	<b>1</b>
		<b>Gulf Stone Crab</b>	<b>1</b>
		<b>Sea Squirt</b>	<b>1</b>
		<b>Brittle Star</b>	<b>2</b>
		<b>Bigeye Searobin</b>	<b>1</b>
		<b>Tricolor Anemone</b>	<b>1</b>

\*Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.

**Memorandum to:** Dr. Parwinder Grewal  
**From:** Institutional Animal Care and Use Committee  
**Subject:** Semiannual Report of the Program Review and Facility Inspection  
**Date:** May 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]**

A new Assurance was sent to OLAW for review and approval.

**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**

Animal Care and Use Program Review Date(s): May 7, 2019

Select A or B:

- ☒ A. There were no deficiencies in the program during this reporting period.  
☐ B. The following deficiencies have been identified: *[describe each deficiency, identify each deficiency as either minor or significant, and provide a reasonable and specific plan and schedule for the correction of each deficiency, deficiencies may be recorded on a separate table and attached, the last page of OLAW's Sample Semiannual Program Review and Facility Inspection Checklist provides a sample table]*

### III. Deficiencies in the Institution's Animal Facility

Animal Facility Inspection Date(s): May 8, 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: *[describe each deficiency, identify each deficiency as either minor or significant, and provide a reasonable and specific plan and schedule for the correction of each deficiency, deficiencies may be recorded on a separate table and attached, the last page of OLAW's Sample Semiannual Program Review and Facility Inspection Checklist provides a sample table]*

See list attached.

### IV. 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]*

### V. Status of AAALAC Accreditation *[identify accredited facilities, if applicable]*

N/A

### VI. Signatures *[signatures of a majority of the IACUC members required by AWAR (§2.31,c,3), if applicable]*

Names of IACUC Members

Signatures

Dr. Christopher Vitek

Dr. Sander Hacker

(b) (6)

Dr. Richard Costello

Ms. Cordelia Rasa

(b) (6)



## Semiannual Program Review and Facility Inspection Report

**Date: May 8, 2019**

**Members in Attendance: All Sites: Dr. Torres, Dr. Reyna, Ms. Depeault, Dr. Hacker, Ms. Rasa, Dr. Vitek,**

**Edinburg site only: Dr. Costello and Dr. Banu**

**Brownsville and SPI sites only: Dr. Srinivasa**

Deficiency Category*	✓	Location	Deficiency and Plan for Correction	Responsible Party	Correction Schedule and Interim Status	Date Complete
M		(b) (4)	<u>Deficiency:</u> Needs informational sign inside the cage wash to indicate the deactivation cable location and function "Pull Here to Stop Machine" sign <u>Correction:</u> Post Sign or Buy Stickers	Laboratory Animal Resources	June 30, 2019	Sign was hung but fell. Stickers ordered. May 2019
M		(b) (4)	<u>Deficiency:</u> Internal "Push Here to Open" sign is missing from cage washer door on dirty side <u>Correction:</u> Post Sign or Buy Stickers	Laboratory Animal Resources	June 30, 2019	Sign was hung but fell. Stickers ordered. May 2019
M		(b) (4)	<u>Deficiency:</u> One lizard needs a sign to identify it. <u>Correction:</u> Post sign.	(b) (6)	June 30, 2019	Lizard gone in summer 2019.
M		(b) (4)	<u>Deficiency:</u> Needs feed log for turtles; label needs more detail <u>Correction:</u> Post feed log; add detail for observer to know species and protocol number	(b) (6)	June 30, 2019	Feed logs put in summer 2019– two turtles left
M		(b) (4)	<u>Deficiency:</u> Room is dirty (needs to be cleaned); Needs checklist for when the cleaning and feedings are done; Needs feeding procedure checklist; Needs log of water quality, temperature, pH values and salinity <u>Correction:</u> Clean room; post checklists and log	(b) (6)	June 30, 2019	All done in summer 2019

\* **A** = acceptable

**M** = minor deficiency

**S** = significant deficiency (is or may be a threat to animal health or safety)

**C** = change in program (PHS Policy [IV.A.1.a.-i.](#)) (include in semiannual report to IO and in annual report to OLAW)

**NA** = not applicable

✓ Check if repeat deficiency

## Semiannual Program Review and Facility Inspection Report

**Date: May 8, 2019**

**Members in Attendance: All Sites: Ms. Depeault, Dr. Hacker, Ms. Rasa, Dr. Vitek, Dr. Torres, Dr. Reyna**

**Edinburg site only: Dr. Costello and Dr. Banu    Brownsville and SPI only: Dr. Srinivasa**

Deficiency Category*	✓	Location	Deficiency and Plan for Correction	Responsible Party	Correction Schedule and Interim Status	Date Complete
M		(b) (4)	<u>Deficiency:</u> Open spray bottle needs labeling; unused cages appeared dirty- clean to avoid cross-contamination; no waste filter seen <u>Correction:</u> label bottle; clean cages; add waste filter	(b) (6)	June 30, 2019	Room reorganized in summer 2019.
M			<u>Deficiency:</u> Fish with no protocol number, labeling or logs. <u>Correction:</u> Post protocol number and label tank with species, protocol number and contact person; have logs available for inspection for feeding and cleaning		June 30, 2019	Fish removed in summer 2019.
M			<u>Deficiency:</u> Cloudy water in bottles on clean side; clean cages moved to hallway need cover for cleaning rack <u>Correction:</u> Use clear water on the clean side; purchase covers and use them for cleaning racks		June 30, 2019	Bottles: May 9, 2019 No covers ordered
M			<u>Deficiency:</u> Cage wash is down (LAR and facilities); Mops need to be hung (LAR and (b) (6) ) <u>Correction:</u> Fix cage wash; hang mops to dry		June 30, 2019	Cage wash fixed July 19, 2019; Mops hung July 6, 2019
M			<u>Deficiency:</u> Minor cracks in cages, blood in Mating 7 Cage B3; stickers with no code <u>Correction:</u> Monitor cages daily with notes taken; post key for circular stickers		June 30, 2019	Daily notes July 17, 2019; key posted July 7, 2019

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## Semiannual Program Review and Facility Inspection Report

**Date: May 8, 2019**

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**Edinburg site only: Dr. Costello and Dr. Banu    Brownsville and SPI only: Dr. Srinivasa**

Deficiency Category*	✓	Location	Deficiency and Plan for Correction	Responsible Party	Correction Schedule and Interim Status	Date Complete
M		(b) (4)	<u>Deficiency:</u> cages not clean; cracks in some cages; stickers with no code <u>Correction:</u> clean cages; monitor cages daily with notes; post key for circular stickers	(b) (6)	June 30, 2019	Cages washed; circular codes posted by July 2019
M			<u>Deficiency:</u> Has there been water testing done on the water on the change station since filled 11-9-2018? <u>Correction:</u> Change water, label properly and timely		June 30, 2019	Water tested with correct labels by July 2019
M			<u>Deficiency:</u> Euthanasia chart does not include Opossums <u>Correction:</u> Include information on chart regarding cage type, maximum number per cage, total volume, flow rate and total exposure time		June 30, 2019	Information provided in summer 2019
M			<u>Deficiency:</u> Hood failed inspection in February 2019 <u>Correction:</u> Fix what doesn't pass inspection and have hood inspected again		PO issued, awaiting repair	Repair scheduled for last quarter of 2019
M			<u>Deficiency:</u> Room smelled badly <u>Correction:</u> Garbage needs to be emptied on a daily basis		May 9, 2019	Garbage emptied daily by May 9, 2019

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**Date: May 8, 2019**

**Members in Attendance: All Sites: Ms. Depeault, Dr. Hacker, Ms. Rasa, Dr. Vitek, Dr. Torres, Dr. Reyna**

**Edinburg site only: Dr. Costello and Dr. Banu    Brownsville and SPI only: Dr. Srinivasa**

Deficiency Category*	✓	Location	Deficiency and Plan for Correction	Responsible Party	Correction Schedule and Interim Status	Date Complete
M		(b) (4)	<u>Deficiency:</u> Used latex gloves on bench and sink; needs protocol numbers labelled <u>Correction:</u> Throw into garbage all gloves after use; label all tanks with approved IACUC AUP number	(b) (6)	June 30, 2019	Fixed in May 2019
M			<u>Deficiency:</u> No feeding logs; no procedures posted <u>Correction:</u> Have completed feeding logs available at all times; have procedures of how to feed fish available at all times		June 30, 2019	Fixed in May 2019
M			<u>Deficiency:</u> Needs approved amendment for red-eared sliders <u>Correction:</u> Add amendment to approved AUP protocol		June 30, 2019	AUP updated in summer 2019
M			<u>Deficiency:</u> Door to storage room needs hole for air hose to avoid crimping or cutting off air <u>Correction:</u> Made hole in door frame		June 30, 2019	Fixed May 2019

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**S** = significant deficiency (is or may be a threat to animal health or safety)

**C** = change in program (PHS Policy [IV.A.1.a.-i.](#)) (include in semiannual report to IO and in annual report to OLAW)

**NA** = not applicable

✓ Check if repeat deficiency