



March 30, 2021

SENT VIA EMAIL

Russ Kick
Rise for Animals [formerly NEAVS]
333 Washington Street, Suite 850
Boston, Massachusetts 02108
Russ@riseforanimals.org

Dear Mr. Kick:

The Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry (CDC/ATSDR) received your November 17, 2020, Freedom of Information Act (FOIA) request on November 17, 2020, stating:

“According to the Division of Vector-Borne Diseases's AAALAC Program Description:

‘All animal labs and support areas are inspected annually by the Office of the Associate Director for Laboratory Science and Safety (OADLSS) to ensure all required safety measures are still in place and are commensurate with the current risks associated with the research and procedures being performed in each suite.’

We assume that this applies to all animal labs and support areas within the CDC, not just the DVBD. Therefore, we request the inspection report, closing memo, and other memorializations (including all attachments, accompanying documents, and photos and videos) for the most recent inspection of every component of the CDC performing animal experimentation.

This would include, but not be limited to, the National Center for Emerging and Zoonotic Infectious Diseases, the National Institute for Occupational Safety and Health, and the Division of Vector-Borne Diseases in Fort Collins.

[01/01/2018 – 11/17/2020]”

We located 71 pages of responsive records (9 pages released in full; 62 pages released in part). After a careful review of these pages, some information was withheld from release pursuant to 5 U.S.C. §552 Exemptions 3 and 6.

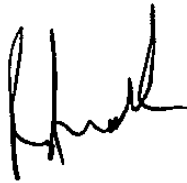
Exemption 3 permits withholding of records or information if a law specifically exempts the material from disclosure. Specifically, 42 U.S.C. § 262(a)(h)(1)(E) protects any portion of an evaluation or report of an inspection of a specific registered person conducted under subsection (f) that identifies the listed agent or toxin possessed by a specific registered person or that discloses the identity or location of a specific registered person if the agency determines that public disclosure of the information would endanger public health or safety. Examples of information withheld include building lab/room locations.

Exemption 6 protects information in personnel and medical files and similar files when disclosure would constitute a clearly unwarranted invasion of personal privacy. The information that has been withheld under Exemption 6 consists of personal information, such as names, signatures, and email addresses. We have determined that the individuals to whom this information pertains has a substantial privacy interest in withholding it.

You may contact our FOIA Public Liaison at 770-488-6277 for any further assistance and to discuss any aspect of your request. Additionally, you may contact the Office of Government Information Services (OGIS) at the National Archives and Records Administration to inquire about the FOIA mediation services they offer. The contact information for OGIS is as follows: Office of Government Information Services, National Archives and Records Administration, 8601 Adelphi Road-OGIS, College Park, Maryland 20740-6001, e-mail at ogis@nara.gov; telephone at 202-741-5770; toll free at 1-877-684-6448; or facsimile at 202-741-5769.

If you are not satisfied with the response to this request, you may administratively appeal by writing to the Deputy Agency Chief FOIA Officer, Office of the Assistant Secretary for Public Affairs, U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Avenue, Suite 729H, Washington, D.C. 20201. You may also transmit your appeal via email to FOIARequest@psc.hhs.gov. Please mark both your appeal letter and envelope "FOIA Appeal." Your appeal must be postmarked or electronically transmitted by June 28, 2021.

Sincerely,

A handwritten signature in black ink, appearing to read 'Roger Andoh', with a stylized, cursive script.

Roger Andoh
CDC/ATSDR FOIA Officer
Office of the Chief Operating Officer
Phone: (770) 488-6399
Fax: (404) 235-1852

Enclosures

#21-00233-FOIA

Office of Laboratory Science and Safety

Date: 11/16/2020

To: (b)(6)
Cc: (b)(6)

Thank you for participating in the 2020 Laboratory Safety Survey Virtual Document Review. We have completed the Lab Safety Survey Document Review of your documents to include:

- Biosafety Manual(s)
- Biological Risk Assessments
- Exposure Control Plan
- Material Transfer Certificates
- Minimum Requirements for a Lab-Specific Chemical Hygiene Plan
- Certification of Annual Review and Updates (for Chemical Hygiene Plan)
- Completed Chemical Risk Assessments(s)
- Chemical Inventory
- Select Agent Site-Specific Incident Response Plan inserts
- Select Agent Site-Specific Security Plan Risk Assessment insert

2020 OLSS Biosafety Document Review Comments and Findings:

We have no findings to report.

2020 OLSS Chemical Document Review Comments and Findings:

We have no findings to report. Comments have been sent previously; we will review these during the 2021 survey period.

OLSS Laboratory walkthrough was not conducted as part of the 2020 survey period.

Review of Material Transfer Certificates for 2020 is deferred to a later date.

No further action is required from your program.

Thanks again for your continual support. Please contact OLSS at Biologicalsafety@cdc.gov if you have questions or concerns.

Thank you,

(b)(6)

Office of Laboratory Science and Safety

Date: 11/12/2020

To: (b)(6)
Cc: (b)(6)

Thank you for participating in the 2020 Laboratory Safety Survey Virtual Document Review. We have completed the Lab Safety Survey Document Review of your documents to include:

- Biosafety Manual(s)
- Biological Risk Assessments
- Exposure Control Plan
- Material Transfer Certificates N/A
- Minimum Requirements for a Lab-Specific Chemical Hygiene Plan
- Certification of Annual Review and Updates (for Chemical Hygiene Plan)
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- Chemical Inventory
- Select Agent Site-Specific Incident Response Plan inserts N/A
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Office of Laboratory Science and Safety

Date: 11/16/2020

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Office of Laboratory Science and Safety

Date: 11/16/2020

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Cc:

(b)(6)

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Review of Material Transfer Certificates for 2020 is deferred to a later date.

No further action is required from your program.

Thanks again for your continual support. Please contact OLSS at Biologicalsafety@cdc.gov if you have questions or concerns.

Thank you,

(b)(6)

Date: 11/09/2020

To:

(b)(6)

Cc:

Thank you for participating in the 2020 Laboratory Safety Survey Virtual Document Review. We have completed the Lab Safety Survey Document Review of your documents to include:

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- Exposure Control Plan
- Material Transfer Certificates
- Minimum Requirements for a Lab-Specific Chemical Hygiene Plan
- Certification of Annual Review and Updates (for Chemical Hygiene Plan)
- Completed Chemical Risk Assessments(s)
- Chemical Inventory
- Select Agent Site-Specific Incident Response Plan inserts
- Select Agent Site-Specific Security Plan Risk Assessment insert

2020 OLSS Biosafety Document Review Comments and Findings:

- None

2020 OLSS Chemical Document Review Comments and Findings:

- None

The OLSS Lab Safety Survey Walkthrough of (b)(3):42 U.S.C. § 262a(h)(1)(E) was conducted on 10/16/2020. Survey Participants:

(b)(6)

The OLSS Lab Safety Survey Walkthrough of (b)(3):42 U.S.C. § 262a(h)(1)(E) was conducted on 11/06/2020. Survey Participants:

(b)(6)

2020 OLSS Laboratory Safety Survey Biosafety Walkthrough Comments and Findings:

- None

We appreciate your patience as we proceed to meet the requirements of the Laboratory Safety Survey Process this year and welcome constructive feedback. If you need further information or have any questions about the 2020 Laboratory Safety Survey Results, please contact (b)(6) for Biosafety at (b)(6) for Chemical Safety and (b)(6) the OLSS Lab Safety Survey Program Manager, (b)(6) or email BiologicalSafety@cdc.gov.

Thank you,

(b)(6)

Date: 11/5/2020

To:

Cc:

(b)(6)

Thank you for participating in the 2020 Laboratory Safety Survey Virtual Document Review. We have completed the Lab Safety Survey Document Review of your documents to include:

- Biosafety Manual(s)
- Biological Risk Assessments
- Exposure Control Plan
- Material Transfer Certificates
- Minimum Requirements for a Lab-Specific Chemical Hygiene Plan
- Certification of Annual Review and Updates (for Chemical Hygiene Plan)
- Completed Chemical Risk Assessments(s)
- Chemical Inventory
- Select Agent Site-Specific Incident Response Plan inserts
- Select Agent Site-Specific Security Plan Risk Assessment insert

2020 OLSS Biosafety Document Review Comments and Findings:

- None

2020 OLSS Chemical Document Review Comments and Findings:

- None

The OLSS Lab Safety Survey Walkthrough was conducted on 07/31/2020. Survey Participants:

(b)(6)

2020 OLSS Laboratory Safety Survey Biosafety Walkthrough Comments and Findings:

- None

We appreciate your patience as we proceed to meet the requirements of the Laboratory Safety Survey Process this year and welcome constructive feedback.

If you need further information or have any questions about the 2020 Laboratory Safety Survey Results, please contact (b)(6) for Chemical Safety

(b)(6)

the OLSS Lab Safety Survey Program Manager
email BiologicalSafety@cdc.gov

(b)(6)

Thank you,

(b)(6)

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Mar 27, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DHCPP/VSPB --- Viral Special Pathogens Branch

Survey Date

Finding

Remediation

Citation

SFN

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: May 15, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DHCPP/VSPB --- Viral Special Pathogens Branch

| Survey Date | Finding | Remediation | Citation | SFN |
|-------------|---------|-------------|----------|-----|
|-------------|---------|-------------|----------|-----|

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Jun 5, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCIRD/ID/IPB --- Immunology and Pathogenesis Branch

| Survey Date | Finding | Remediation | Citation | SFN |
|-------------|---------|-------------|----------|-----|
|-------------|---------|-------------|----------|-----|

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Jun 5, 2020

Last Survey Participants (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCIRD/ID/IPB --- Immunology and Pathogenesis Branch

| Survey Date | Finding | Remediation | Citation | SFN |
|-------------|---------|-------------|----------|-----|
|-------------|---------|-------------|----------|-----|

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Oct 16, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

SCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DHCPP/VSPB --- Viral Special Pathogens Branch

Survey Date

Finding

Remediation

Citation

SFN

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Oct 16, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DHCPP/VSPB --- Viral Special Pathogens Branch

| Survey Date | Finding | Remediation | Citation | SFN |
|-------------|---------|-------------|----------|-----|
|-------------|---------|-------------|----------|-----|

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: May 15, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DHCPP/PRB --- Poxvirus and Rabies Branch

| Survey Date | Finding | Remediation | Citation | SFN |
|-------------|---------|-------------|----------|-----|
|-------------|---------|-------------|----------|-----|

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Mar 2, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DHCPP/PRB --- Poxvirus and Rabies Branch

Survey Date

Finding

Remediation

Citation

SFN

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Oct 2, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DVBD/RZB --- Rickettsial Zoonoses Branch

Survey Date

Finding

Remediation

Citation

SFN

0 outstanding safety finding(s) for this work area

Office of the Associate Director for Laboratory Science and Safety (OADLSS)

Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Jan 13, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

| Survey Date | Finding | Remediation | Citation | SFN |
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Safety Survey Findings

Printed: Feb 11, 2021

Last Surveyed: Jan 13, 2020

Last Survey Participants: (b)(6)

(b)(3):42 U.S.C. § 262a(h)(1)(E)

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Team Lead: (b)(6)

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CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

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Team Lead: (b)(6)

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CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

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Team Lead (b)(6)

(b)(6)

CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

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(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR: (b)(6)

Team Lead: (b)(6)

(b)(6)

CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

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CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

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Last Survey Participants

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(b)(3):42 U.S.C. § 262a(h)(1)(E)

(b)(6)

LSCR:

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Team Lead:

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(b)(6)

CDC/DDID/NCEZID/DSR/CMB --- Comparative Medical Branch

Survey Date

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Citation

SFN

0 outstanding safety finding(s) for this work area

Acronyms

| | |
|--------|---|
| ABSL | Animal Biological Safety Level |
| ADB | Arboviral Diseases Branch |
| BSL | Biological Safety Level |
| CMB | Comparative Medicine Branch |
| DBD | Bacterial Diseases Branch |
| DDID | Deputy Director for Infectious Diseases |
| DHCPP | Division of High-Consequence Pathogens and Pathology |
| DSR | Division of Scientific Resources |
| DVBD | Division of Vector-Borne Diseases |
| ID | Influenza Division |
| IPB | Immunology and Pathogenesis Branch |
| NCEZID | National Center for Emerging and Zoonotic Infectious Diseases |
| NCIRD | National Center for Immunization and Respiratory Diseases |
| OLSS | Office of Laboratory Science and Safety |
| PRB | Poxvirus and Rabies Branch |
| RZB | Rickettsial Zoonoses Branch |
| STS | Survey Tracking System |
| VSPB | Viral Special Pathogens Branch |

January 2020

| | | | January 2020 Employee Safety Audits of (b)(3):42 U.S.C. § 262a(h)(1)(E) Labs | | |
|----------------|-------------------------------------|----------|--|---|-------------------------------------|
| Employee | Room | Division | Audit Question | Audit Finding | Corrective Action |
| (b)(6) ACIB | (b)(3):42 U.S.C. § 262a(h)(1)(E) | (b)(6) | #5 Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram? | No-One bottle of ammonium bicarbonate not labeled | Corrected at time of audit |
| | | | #17 If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | No-Needs inspected | Step stool, inspection not required |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | Eyewash caps need to be replaced | Corrected 2/13/20 |
| | | | 5 Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram? | No | Corrected at time of inspection |
| | | | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | Waste containers on lab bench are missing pictograms | Corrected at time of inspection |
| | | | | Stains on ceiling tiles located in bay 2 and in the back of the lab. Tiles missing in bays 2 and 3 | Corrected |

February 2020

| | | | February 2020 Employee safety audits of (b)(3):42 U.S.C. § 262a(h)(1)(E) laboratories | | |
|--------|-------------------------------------|----------|---|----------------------------|-----------------------------|
| PI | Room | Division | Audit Question | Finding | Corrective Action |
| (b)(6) | (b)(3):42 U.S.C. § 262a(h)(1)(E) | (b)(6) | #17 If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | No-Needs inspected | No step ladder present |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | Yes-Need a new eyewash tag | Corrected |
| | | | #15 Are hand washing soap and paper towels available for use where sinks are available? | Yes-Getting Low | Additional supplies ordered |
| | | | #1 Is the contact information on the lab layout maps at the door to the lab up to date? | No | Corrected |
| | | | #27 Are laboratory chairs made of non-porous surfaces that resist the absorption of liquids and the harsh effects of disinfectants? | No | Corrected |

May / June 2020

| May / June 2020 (Covid19 – mandatory telework period) Safety Office Audits of Laboratory Spaces | | | | | |
|---|---|----------|---|--|--|
| PI | Room | Division | Audit Question | Finding | Corrective Action |
| (b)(6) | (b)(3): 42 U.S.C. § 262a(h)(1)(E) | (b)(6) | #27 Are laboratory chairs made of non-porous surfaces that resist the absorption of liquids and harsh effects of disinfectants? | No – 1 fabric chair (one grey at the bench) Order placed for chairs | Replaced |
| | | | #22 Are all refrigerators, freezers and microwaves in the laboratory labeled for laboratory use only? | No | Corrected at time of audit |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | No | Corrected at time of audit |
| | | | #5 Are all bottles properly labeled in legible English with their content? | No-Labels are faded on top of Acquity HPLC Mandatory telework | |
| | | | | GHS pictogram added to some of the Acquity HPLC bottles Mandatory telework | |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | No-Needs a new tag | Corrected at time of audit |
| | | | #11 Are compressed gas cylinders secured, properly capped when not in use and empty cylinders properly marked? | 2 cylinders not secure Strap is not long enough to secure both | Additional strap added. Lab needs to order a longer strap to secure both cylinders |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | Broken cap | Corrected |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | No-Needs a new tag | Corrected at time of audit |
| | | | | Sharps container filled to fill line | Removed from lab at time of the audit |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | Caps not on | Corrected at time of audit |
| | | | #17 If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | Yes | Due in June, inspected at time of audit |
| | | | #23 are secondary egress doors from the lab blocked in any way? | Yes | Moved box in front of door at time of audit |
| | | | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | Yes 1 near the door | Corrected |
| | | | #28 Are electrical raceways used for storage of liquids? | Yes-Nuclease free water on raceway | Corrected at time of audit |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Yes – faded | Replaced faded label |
| | | | #27 Are laboratory chairs made of non-porous surfaces that resist absorption of liquids? | Yes, back right carrel | Corrected |
| | | | #34 Are containers available for disposal of biological waste? | Yes-Filled above fill line | Removed from the lab |
| | | | #1 Is the contact information on the lab layout maps at the door up to date? | No | Updated |

| | | | | | |
|--------|---|--------|---|---|--|
| (b)(6) | (b)(3):4 2 U.S.C. § 262a(h) (1)(E) | (b)(6) | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Fume hood due 5/31/20 | 6/10/2020 |
| | | | #22 Are all refrigerators, freezers and microwaves in the laboratory labeled for laboratory use only? | No-New refrigerator | Corrected at time of audit |
| | | | | CO2 incubator alarming | Lab contact advised that it was not critical. Alarm silenced. |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Mopec workstation ever certified | According to ENV, there are no specs for certifying this workstation |
| | | | #17 If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | No-Has not been inspected | Corrected |
| | | | #1 Is the contact information on the lab layout maps at the door up to date? | No-Only shows 1 eyewash | Updated |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | No | Certified 6/11/2020 |
| | | | | General housekeeping needs to be addressed following mandatory telework | Corrected |
| | | | #27 Are laboratory chairs made of non-porous surfaces that resist absorption of liquids and the harsh effects of disinfectants? | No-Chairs ordered | Corrected |
| | | | #27 Are laboratory chairs made of non-porous surfaces that resist absorption of liquids and the harsh effects of disinfectants? | No | Corrected |
| | | | #1 Is the contact information on the lab layout maps at the door to the lab up to date? | No-There is a flam fridge next to fume hood | Does not need marked |
| | | | #1 Is the contact information on the lab layout maps at the door to the lab up to date? | No-Change alternate and number on map | Updated |
| | | | #1 Is the contact information on the lab layout maps at the door to the lab up to date? | No-No tanks along the wall | Updated |
| | | | #17 If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | No-Last checked in 2017 | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | No-No phone | Phone on the wall has emergency stickers |
| | | | #2 Are Cispro labels visible on all hazardous chemical containers? | No-Many items in the flam cabinet do not have Cispro labels Lab Cispro handler teleworking | Corrected |
| | | | #2 Are Cispro labels visible on all hazardous chemical containers? | Yes-Empty bottles on the counter need taken out of Cispro Lab Cispro handler teleworking | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | No-No phone ITSO work order submitted | Corrected |

| | | | | | | |
|--------|-------------------------------------|--------|---|---|--------------------------------|-------------------------------------|
| (b)(6) | (b)(3):42 U.S.C. § 262a(h)(1)(E) | (b)(6) | #27 Are laboratory chairs made of non-porous surfaces that resist the absorption of liquids and the harsh effects of disinfectants? | No-Cloth chair | Chair removed | (b)(3):42 U.S.C. § 262a(h)(1)(E) |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Fume hood due 2/28/20 | Certified 6/10/2020 | |
| | | | #16 Is a stool or ladder available to reach higher items? | None seen-Order placed for step stool | Corrected | |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | CFH due 1/30/20 | Certified 6/10/2020 | |
| | | | #27 Are laboratory chairs made of non-porous surfaces that resist the absorption of liquids and harsh effects of disinfectants? | No-2 chairs at carrels need replaced Order placed for chairs | Replaced | |

July 2020

| | | | July 2020 (Covid19 mandatory telework) Safety Office audits of laboratory spaces | | |
|--------|-------------------------------------|----------|---|---|-------------------|
| PI | Room | Division | Audit Question | Finding | Corrective Action |
| (b)(6) | (b)(3):42 U.S.C. § 262a(h)(1)(E) | (b)(6) | #13 Is glass disposed of properly in puncture resistant container? | Needs a yellow disposal sticker | Corrected |
| | | | | Pick up sharps container | Removed |
| | | | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | No-Large hole around sprinkler head | Corrected |
| | | | #5 Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram? | Yes, however labels on HPLC have faded and need updated Emailed contact – not onsite due to mandatory telework | |
| | | | | General housekeeping needs addressed Emailed contact – not onsite due to mandatory telework | |
| | | | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | No-One tile above the CFH is out of its track | Corrected |
| | | | | Open light cover | Corrected |
| | | | #5 Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram? | Yes-GHS pictogram needed on spray bottle | Corrected |
| | | | | Open light cover | Corrected |
| | | | #4 Is secondary containment for all hazardous liquids available as needed and large enough to handle the volume of the primary container? | Tissue samples in the hood need a secondary container | Corrected |

| | | | | | |
|--------|---|--------|--|--|-----------|
| (b)(6) | (b)(3): 42 U.S.C. § 262a(h) (1)(E) | (b)(6) | #5 Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram? | Empty glass bottle on the floor needs to be labeled as "Empty" | Corrected |
| | | | #2 Are Cispro labels visible on all hazardous chemical containers? | Denatured alcohol bottles without Cispro labels | Corrected |
| | | | #5 Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram? | No-Acid waste missing GHS pictograms | Corrected |
| | | | #22 Are all refrigerators, freezers and microwaves in the laboratory labeled for laboratory use only? | No | Corrected |

August 2020:

| August 2020 (Covid19 mandatory telework) Laboratory safety audits | | | | | |
|---|---|----------|---|--|---------------------------------------|
| PI | Room | Division | Audit Question | Audit Finding | Corrective Action |
| (b)(6) | (b)(3):4 2 U.S.C. § 262a(h) (1)(E) | (b)(6) | #12 Are special hazard areas properly marked? | Biohazard on equipment | Lab marked for biohazard use |
| | | | #34 Are containers available for disposal of biological waste? | Did not see one / not sure of status | Biohazard sharps containers available |
| | | | #34 Are containers available for disposal of biological waste? | Did not observe / do they need? | Biohazard sharps containers available |
| | | | #15 Are hand washing soap and paper towels available for use where sinks are available? | No | Corrected |
| | | | #16 Is a stool or ladder available to reach higher items? | No | Corrected |
| | | | #1 Is the contact information on the lab layout maps at the door to the lab up to date? | Double check lab map (b)(6) | Correct on lab map |
| | | | #2 Are Cispro labels visible on all hazardous chemical containers? | No-Some missing in flam cabinet and on counter Lab contact emailed – not currently onsite | |
| | | | #5 Are all bottles properly labeled in legible English with their content? | No Cracked and unlabeled spray bottle next to sink | Corrected / removed |
| | | | #1 Is the contact information on the lab layout maps at the door to the lab up to date? | Check contacts book – should be (b)(6) | Lab map correct |
| | | | #12 Are special hazard areas properly marked? | Biohazard container / not on lab map | Updated |
| | | | #24 Only approved hazard warnings are posted on the laboratory doors? | Biohazard container? | Yes, for biohazard work |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | Not yet done for August | Corrected |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | 1 of 2 checked | Corrected |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Two BSCs due in Sept | Corrected 9/29/20 |

| | | | | | |
|--------|--|--------|---|---------------------------------|-----------|
| (b)(6) | (b)(3):42 U.S.C. § 262a(h)(1) (E) | (b)(6) | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | Hole in the tile above the door | Corrected |
| | | | #9 Are eyewashes accessible, caps in place and inspected? | One eyewash needs new caps | Corrected |

September 2020:

| September 2020 Covid19 Mandatory telework Safety Audits | | | | | |
|---|---|----------|---|--|--------------------|
| PI | Room | Division | Audit Question | Finding | Corrective Action |
| (b)(6) | (b)(3): 42 U.S.C. § 262a(h) (1)(E) | (b)(6) | #17 If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | No-Need a tag for ladder | Corrected |
| | | | | Needs yellow sticker for glass disposal box | Corrected |
| | | | | Blue shelves need to be anchored to the wall | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Faded | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Faded | Corrected |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Due in Sept | Corrected |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Due in Sept | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Faded | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Faded | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Faded | Corrected |
| | | | #2 Are Cispro labels visible on all lab layout maps at the door the lab up to date? | No-Do not see label on Sodasorb bottle | |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Due in Sept | Corrected |
| | | | #23 Are emergency phone numbers readily available in case of emergency? | Faded | Corrected |
| | | | #2 Are Cispro labels visible on all lab layout maps at the door the lab up to date? | Sheet on door has several labels that need disposed | Chemicals disposed |
| | | | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | Yes Outside of <div>cracked tile and stained tile</div> | |

(b)(3):42
U.S.C. §
262a(h)(1)(E)

October 2020:

| October 2020 Safety Audits Covid-19 Maximal Telework | | | | | |
|--|---|----------|---|---|--------------------------|
| PI | Room | Division | Audit Question | Finding | Corrective Action |
| (b)(6) | (b)(3): 42 U.S.C. § 262a(h) (1)(E) | (b)(6) | | Several empty isoflurane bottles under the bench with Cispro labels | Corrected |
| | | | #15 Are hand washing soap and paper towels available for use where sinks are available? | Needs paper towels | Corrected |
| | | | #34 Are containers available for disposal of biological waste? | Not sure if needed? | Bags available in drawer |
| | | | #10 Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage? | Yes Due in November | Corrected 11/24/20 |

November 2020:

| November 2020 Safety Audits *Covid-19 - Mandatory Telework* | | | | | |
|---|--|----------|---|--|------------------------|
| Employee | Room | Division | Audit Question | Finding | Corrective Action |
| (b)(6) | (b)(3):42 U.S.C. · § 262a(h)(1)(E) | (b)(6) | #9 Are eyewashes accessible, caps in place and inspected? | Not yet for Nov | Corrected |
| | | | #13 Is glass disposed of properly in puncture resistant container? | Glass box is full *previously reported, lab personnel on mandatory telework | Corrected |
| | | | #26 Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | Tiles missing in the back of room Stained tile in ongoing leak issue | |
| | | | #13 Is glass disposed of properly in a puncture resistant container | Yes-Needs a yellow tag | Corrected |
| | | | #15 Are hand washing soap and paper towels available for use where sinks are available? | No towels | Corrected |
| | | | | Waste in flam cabinet (b)(6) to see if it is ready for pick up | Collected for disposal |

December 2020: No lab findings to report

MORGANTOWN NIOSH
Laboratory Audit Form

Principal Investigator:

Laboratory Room Number:

Date of Inspection:

Inspected by:

| General Laboratory Safety | | Yes | No | N/A | Comments |
|---------------------------|--|--------------------------|--------------------------|--------------------------|----------|
| 1. | Is the contact information on the lab layout maps at the door to the lab up to date? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. | Are CIPRO labels visible on all hazardous chemical containers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. | Are hazardous liquid chemicals stored on the floor or above the first shelf over the bench? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. | Is secondary containment for all hazardous liquids available as needed and large enough to handle the volume of the primary container? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. | Are all bottles properly labeled in legible English with their content to include appropriate text hazard warning or pictogram (including waste bottles labeled as Waste + Chemical name, wash bottles and reagent bottles)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. | Are containers kept closed except when necessary to add or remove material (ported caps used when necessary; e.g. HPLC waste)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. | Are chemicals stored appropriately by hazard class (flammables in a flammable cabinet /acid, base/toxic, etc) and separated by secondary containment (nitric acid from other acids)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. | Are the only flammable materials stored on lab benches for one day use only? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. | Are eyewashes accessible, caps in place and inspected? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. | Have chemical fume hoods and biological safety cabinets been certified within the last year, operate properly and not used for storage (items in the hood must be for current experimental use)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 11. | Are compressed gas cylinders secured, properly capped when not in use and empty cylinders properly marked? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. | Are special hazard areas (biohazard, radioactive, etc) properly marked? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 13. | Is glass disposed of properly in a puncture resistant container? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. | Are food and/or drink found in the lab? If yes, has the food area been approved by the Safety Office and Division? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15. | Are hand washing soap and paper towels available for use where sinks are available? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16. | Is a stool or ladder available to reach higher items? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17. | If step ladder is present in the lab, is inspection tag attached and has it been inspected in the past year? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18. | Are heavy objects (>25 lbs) stored above shoulder height (5 feet)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19. | Are items stored within 18 inches of the ceiling (excluding perimeter walls)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20. | If employees are working at the bench/hood/bsc, are lab coats available and being worn when personnel are actively working at the bench, fume hood or biological safety cabinet? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 21. | Is proper eye and face protection available and being worn while actively working at the bench? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

| General Laboratory Safety continued | | Yes | No | N/A | Comments |
|---|---|--------------------------|--------------------------|--------------------------|----------|
| 22. | Are all refrigerators, freezers and microwaves in the laboratory labeled for laboratory use only? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. | Are emergency phone numbers readily available in case of emergency? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. | Are secondary egress doors from the lab blocked in any way? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 24. | Only approved hazard warnings are posted on laboratory doors. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 25. | Are the aisles free of obstructions, debris or excess accumulation of materials? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 26. | Are ceiling tiles in the laboratory or laboratory corridor discolored or stained? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 27. | Are laboratory chairs made of non-porous surfaces that resist the absorption of liquids and the harsh effects of disinfectants? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Electrical Safety | | Yes | No | N/A | Comments |
| 28. | Are electrical raceways used for storage of liquids? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 29. | Are electrical cords or power strips in disrepair (cut, frayed, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 30. | Are adequate outlets provided to eliminate extension cords and tripping hazards? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Environmental Health (Biohazards) | | Yes | No | N/A | Comments |
| 31. | Do employees work with biohazardous agents? If YES continues with this section. If NO, then go to next section. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 32. | Are lab coats and gloves used in the lab during all procedures involving microbial agents? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 33. | Is an acceptable disinfectant available for use in the laboratory? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 34. | Are containers available for disposal of biological waste? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Environmental Health (Bloodborne Pathogens) | | Yes | No | N/A | Comments |
| 35. | Do employees work with human blood, human blood products, human tissue, or human cell lines? If NO, then skip this section. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 36. | Is the workplace maintained in a clean and sanitary condition? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 37. | Are sharps containers readily available, leak proof and not overfilled? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | | | |
| | | | | | |
| General Comments and Recommendations | | | | | |
| | | | | | |



Centers for Disease Control and Prevention
Division of Vector-Borne Diseases
3156 Rampart Road
Fort Collins, CO 8051
970-221-6400

MEMORANDUM

To: Steve Monroe, Ph.D.
Institutional Official
Associate Director for Laboratory Science and Safety

From: (b)(6)
Chairperson, CDC-Fort Collins Institutional Animal Care and Use Committee

Subject: Semiannual Evaluation of Animal Care and Use Program and Inspection of
Facilities – Division of Vector-Borne Diseases, Fort Collins, CO

Date: October 13, 2020

CC: (b)(6)
DDID/NCEZID/DVBD/OD
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DDID/NCEZID/DVBD/OD
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OLSS/OLSaf/ACUPO
DVBD Institutional Animal Care and Use Committee (IACUC)

This memorandum documents the August 25 and September 8, 2020 Semiannual Evaluation of the Centers for Disease Control and Prevention (CDC) – Division of Vector-Borne Diseases animal facility inspection and program review by the Institutional Animal Care and Use Committee (IACUC), as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals and as a condition of this Institution's Animal Welfare Assurance on file with the Office of Laboratory Animal Welfare (OLAW) and United States Department of Agriculture (USDA) Animal Welfare Regulations, 9 CFR Chapter I, subchapter A, as applicable. This evaluation utilized the National Research Council's *Guide for the Care and Use of Laboratory Animals* (2011).

Findings of the September 8, 2020 Semiannual Review of the CDC-Fort Collins Animal Care and Use Program

The CDC-Fort Collins IACUC conducted the Semiannual Evaluation of the Institution's Animal Care and Use Program on September 8, 2020 using the PHS Policy on Humane Care and Use of Laboratory Animals (PHS Policy), the *Guide for the Care and Use of Laboratory*

Animals, 2011 (the “*Guide*”), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable.

CDC-Fort Collins IACUC members who participated in the Program review included (b)(6) (b)(6) provided administrative support.

The modified OLAW checklist was utilized for the review with discussion focused on the occupational health and safety program (OHSP). The Occupational Health Clinic at DVBD closed near the end of May 2020 with the retirement of the physician assistant. The IACUC determined that a significant deficiency existed in the OHSP program. This consisted of the lack of ability for new personnel or existing personnel to update occupational health program enrollment and respiratory assessment due to the retirement of the occupational health physician’s assistant in May 2020. No replacement PA or nurse had been provided for the DVBD clinic and details of a functional plan had not been communicated to the DVBD IACUC by the Atlanta Occupational Health Clinic (OHC) at the time of the semiannual program review. OSSAM in Atlanta has identified University of Colorado Health (UCH) as a provider for occupational health and respiratory evaluations on a fee-for-service basis until a contract can be sent out for bids later this year. There are currently 12 animal research staff at DVBD that are actively conducting animal work on their approved protocols and are out of compliance with IACUC Policy FTC-029 Policy and Guidance on Occupational Safety and Health Program Enrollment and Respirator Fit Testing. The IACUC agreed to allow 60 days from the meeting date (Sept 9, 2020) so animal use could continue while the Atlanta-OHC finalizes procedures. This extension will be re-evaluated at the November IACUC meeting. In addition, the IO has met with OSSAM and DVBD management to assist in expediting the transition from the DVBD clinic to the Atlanta OHC for occupational health needs.

As of the writing of this memorandum, the Atlanta OHC is working to assure that personnel currently conducting animal work on approved protocols will be updated in their enrollment quickly. During the week of October 5, 2020, some Fort Collins FTEs visited the UCH clinic and successfully updated their occupational health program enrollment. OHC/OSSAM have provided a draft contract for provision of occupational health services for DVBD review. This contract will go out for bid in the near future.

The PHS Policy states, “This Policy requires that Assured institutions base their programs of animal care and use on the Guide for the Care and Use of Laboratory Animals and that they comply with the applicable regulations (9 CFR, Subchapter A) issued by USDA under the Animal Welfare Act.” *The Guide for the Care and Use of Laboratory Animals*, 2011 indicates that “each institution must establish and maintain an occupational health and safety program (OHSP) as an essential part of the overall Program of animal care and use (CFR 1984a,b,c; DHHS 2009; PHS 2002).” The DVBD PHS Assurance and the DVBD AAALAC Program Description describe the occupational health and safety program. The IACUC has determined that the DVBD OHSP is not being maintained as required and recommends reporting this significant deficiency to OLAW.

Findings of the August 25, 2020 Semiannual Inspection of the CDC-Fort Collins Animal Care

Facilities and Records Review

The CDC-Fort Collins IACUC members reviewed records and inspected the animal facilities on August 25, 2020 using the PHS Policy on Humane Care and Use of Laboratory Animals, the *Guide for the Care and Use of Laboratory Animals*, 2011 (the "Guide"), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable. Currently approved exceptions to the 2011 Guide were also reviewed.

CDC-Fort Collins IACUC members who participated in the facility inspection included (b)(6) (b)(6) provided administrative support (b)(6) animal care contractor services), and (b)(6) contracted alternate attending veterinarian (b)(6) escorted IACUC members through the animal facilities and answered questions. The number of IACUC members conducting the semi-annual facility inspection was limited to the required minimum of 2 due to the restrictions placed on building occupancy during the COVID-19 pandemic.

No significant deficiencies were noted by the IACUC during the facility inspection and records review. Minor deficiencies noted consisted of light bulbs out in 2 animal rooms (see Appendix A for details).

Approved Protocol Exceptions to the Guide

The following are exceptions to the 2011 *Guide* that were reviewed and approved by the IACUC for individual protocols.

Four approved protocols allow mice to be individually housed in a cage with a metal grate to elevate them above a small amount of water. This is allowed for up to 5 days while ticks feed. Ticks drop off into ½" of water kept under the metal grate, replete ticks are removed from the water daily. This is to prevent the mice from ingesting the replete ticks. Mice are provided with a plastic petri dish bottom (as a platform for respite from any discomfort incurred by the metal grate) for days 1-4 before ticks begin dropping off. A mouse hut is provided for additional comfort. Mice are euthanized at the end of the tick-feeding session or returned to regular housing, depending on the study protocol.

Two protocols allow rabbits to be single housed to prevent fighting or to prevent removal or destruction of the ear bags during tick feeding. The investigators and their associates increase contact to 2-4 times a day along with checks from animal care personnel during this period. One protocol allows the use of non-pharmaceutical grade ibuprofen in the drinking water of mice exposed to bacterial pathogens.

Two mouse protocols allow pregnant female mice to be housed individually when they are ready to litter and for a few weeks post-partum.

For the purpose of disease surveillance, one (1) mouse protocol allows for the use of soiled bedding from cages housing mice to be placed in cages with SPF mice as a means of exposure to potential pathogens.

Program Changes

IACUC Policy FTC-22 Training of IACUC Members was modified. The Committee changed the list of required on-line courses and removed the requirement to attend IACUC 101 in person.

IACUC Policy FTC-16 Euthanasia was updated to reflect the changes in the AVMA Guidelines for the Euthanasia of Animals: 2020 Edition. This included the use of CO₂ in gas cylinders with a regulator. Additionally, euthanasia methods for birds was added to the policy.

Protocol submission forms (laboratory animal and field investigations) were updated to reflect the change in Policy FTC-016 Euthanasia.

Program Exceptions

One program exception was made to allow personnel to continue animal work for 60 days despite being out of compliance with IACUC policy, The Guide, and PHS Policy. IACUC will re-evaluate at the November 2020 meeting.

Minority Views

There were no minority views since the last report to the IO.

Names of IACUC Members

Signatures/ Initials

(b)(6) Chairperson

(b)(6) Scientist Member

(b)(6) Scientist

(b)(6) Member

(b)(6) Nonaffiliated, non-scientist member

(b)(6) Attending Veterinarian Member

(b)(6) Statistician Member

(b)(6) Health and Safety Member

(b)(6) Animal Care Project Manager
Alternate Scientist

(b)(6) Alternate scientist

(b)(6) Member, Alternate

(b)(6) Statistician, Alternate

(b)(6) Attending Veterinarian, Alternate

(b)(6) Alternate Nonaffiliated, non-scientist member

(b)(6)

Appendix A

**RESULTS OF IACUC SEMI-ANNUAL PROGRAM REVIEW AND
FACILITY INSPECTION FOR DVBD
FOLLOW-UP RECORD**

August 25, 2020 (inspection)

September 8, 2020 (program review)

| Item to Fix/ Room # | (S) or (M)* | Correction Plan | Person Responsible | Corrective Action Performed | Correct by date | Date Corrected |
|--|------------------------|---|--|---|----------------------------|---------------------------|
| Lack of ability to update occupational health program enrollment or begin and respiratory assessment enrollment for new animal users due to the retirement of the occupational health PA in May 2020. No replacement has been assigned. OSSAM in Atlanta is in the process of possibly using University of Colorado Health as a provider for occupational health and | S | To be worked out with OSSAM in Atlanta and DVBD senior management | (b)(6) and (b)(6) to follow-up with DVBD management on status. (b)(6) to inform the IO and ACUPO Atlanta office (completed 9-9-2020) | Atlanta-OHC working to update enrollment for personnel actively working on animal protocols OSSAM working on a plan to handle future occ. health and respiratory clearance needs for DVBD | 11-8-2020 | TBD |

| Item to Fix/ Room # | (S) or (M)* | Correction Plan | Person Responsible | Corrective Action Performed | Correct by date | Date Corrected |
|--|----------------|-----------------|----------------------------|---|-----------------|----------------|
| respiratory evaluations. Numerous personnel need their enrollment updated and this is delaying animal studies. No reminders are being sent out to personnel when it is time to update their enrollment. IACUC recommends reporting to IO and OLAW | | | | As of the week of Oct 5, 2020, some DVBD staff have been able to visit the UCH clinic to update their enrollment in the occupational health program. OHC/OSSAM has provided a draft contract for occupational health services to DVBD for review. | | |
| (b)(6) 2 light bulbs out in back room | M | Replace bulbs | (b)(6) to place work order | Work order placed 8-25-2020 Lights replaced 8-26-2020 | 9-5-2020 | 8-26-2020 |
| (b)(6) Light out in rabbit room | M | Replace bulb | (b)(6) to place work order | Work order placed 8-25-2020 Light replaced 8-26-2020 | 9-5-2020 | 8-26-2020 |

*Significant (S) or Minor (M)



Centers for Disease Control and Prevention
Division of Vector-Borne Diseases
3156 Rampart Road
Fort Collins, CO 80851
970-221-6400

MEMORANDUM

To: **Steve Monroe, Ph.D.**
Institutional Official
Associate Director for Laboratory Science and Safety
Office of the Director, Centers for Disease Control and Prevention

From: (b)(6)
Chairperson, CDC-Fort Collins Institutional Animal Care and Use Committee

Subject: Semiannual Evaluation of Animal Care and Use Program and Inspection of
Facilities – Division of Vector-Borne Diseases, Fort Collins, CO

Date: May 8, 2018

CC: (b)(6)
ID/NCEZID/DVBD/OD
NCEZID/DVBD/OD
OID/NCEZID/DVBD/OD
ID/NCEZID/DVBD/OD
ID/NCEZID/DVBD/OD
D/NCEZID/DVBD/OD
ID/NCEZID/DSR/OD
ID/ NCEZID/DSR/OD
OID/NCEZID/DSR
O/OADLSS
OD/OADLSS/ACUPO
DVBD Institutional Animal Care and Use Committee (IACUC)

This memorandum documents the March 6, 2018 Semiannual Evaluation of the Centers for Disease Control and Prevention (CDC) – Division of Vector-Borne Diseases animal facility inspection and program review by the Institutional Animal Care and Use Committee (IACUC), as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals and as a condition of this Institution's Animal Welfare Assurance on file with the Office of Laboratory Animal Welfare (OLAW) and United States Department of Agriculture (USDA) Animal Welfare Regulations, 9 CFR Chapter I, subchapter A, as applicable. This evaluation utilized the National Research Council's *Guide for the Care and Use of Laboratory Animals* (2011). The semi-annual activities were conducted by the IACUC in conjunction with the AAALAC site inspection for accreditation renewal.

Findings of the March 6, 2018 Semiannual Review of the CDC-Fort Collins Animal Care and Use Program

The CDC-Fort Collins IACUC conducted the Semiannual Evaluation of the Institution's Animal Care and Use Program on March 6, 2018 using the PHS Policy on Humane Care and Use of Laboratory Animals (PHS Policy), the *Guide for the Care and Use of Laboratory Animals*, 2011 (the "Guide"), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable.

CDC-Fort Collins IACUC members who participated in the Program review included: (b)(6) (b)(6) provided administrative support.

The AAALAC Program Description (PD) was provided for the review. No significant deficiencies were noted. Minor deficiencies consisted of 1) completing Section 2.III.D. Surgery of the PD (section was completed); 2) Appendix 11 HVAC System Summary. Evaluate and revise this appendix so it accurately reflects the program. Is there central temperature monitoring of animal rooms including temperature ranges and alarms? In which position (open or closed) do the re-heat coil valves fail (Appendix 11 was updated and re-heat coil valves fail in the closed position); 3) other minor items were corrected to more accurately reflect the Program (Section 1. Introduction, item D. CDC Director changed and Office of Infectious Diseases Director changed since original submission. Section 2. Description, Item A.1.b. (p. 11) Last paragraph was misplaced, it was moved to Section 2. B. Program Oversight item 1.a.i. (p. 35). Section 2.II.A.4. Noise and Vibration (p. 55). The response was incorrectly considered part of the previous section (aquatic species). The correct response was added. Section 2.III.F. Anesthesia and Analgesia. (p. 79) Doses were corrected due to typographical errors.

The CDC-Fort Collins IACUC members reviewed records and inspected the animal facilities on March 6, 2018 using the PHS Policy on Humane Care and Use of Laboratory Animals, the *Guide for the Care and Use of Laboratory Animals*, 2011 (the "Guide"), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable. Currently approved exceptions to the 2011 Guide were also reviewed.

CDC-Fort Collins IACUC members who participated in the facility inspection include (b)(6) (b)(6) provided administrative support. (b)(6) and (b)(6) (all from animal care contractor services) escorted IACUC members and AAALAC site visitors through the animal facilities and/or answered questions.

No significant deficiencies were noted by the IACUC during the facility inspection and records review. There were a few minor deficiencies noted and their status is listed in Appendix A below.

Approved Protocol Exceptions to the Guide

The following are exceptions to the 2011 *Guide* that were reviewed and approved by the IACUC for individual protocols.

Eight (8) approved protocols allow mice to be individually housed on a metal grate for up to 5 days while ticks feed (ticks drop off into ½" of water kept under metal grate, replete ticks are removed from water daily). Mice are provided with a plastic petri dish bottom (as a platform for respite from any discomfort incurred by the metal grate) for days 2-4 before ticks begin dropping off. A mouse hut is provided for additional comfort. Mice are euthanized at the end of the tick-feeding session or returned to regular housing, depending on the study protocol. One protocol allows rabbits to be single-housed with an Elizabethan-collar to facilitate feeding and biocontainment of ectoparasites or to prevent fighting. Six (6) mouse protocols allow pregnant females to be housed individually when they are ready to litter. For the purpose of disease surveillance, one (1) mouse protocol allows for the use of soiled bedding from other cages housing mice be placed in cages with SPF mice as a means of exposure.

Program Changes

IACUC policies were reviewed and updated since the last semi-annual are as follows:

Program Exceptions

There were no program exceptions during this period since the last report to the IO.

Names of IACUC Members

Signatures/ Initials

| | |
|--------|-------------------------------------|
| (b)(6) | Chairperson |
| (b)(6) | Member |
| (b)(6) | Member |
| (b)(6) | Nonaffiliated, non-scientist member |
| (b)(6) | Attending Veterinarian Member |
| (b)(6) | Statistician Member |
| (b)(6) | Health and Safety Member |
| (b)(6) | Scientist Member |
| (b)(6) | Scientist Member |
| (b)(6) | Alternate Scientist |
| (b)(6) | Scientist Alternate |
| (b)(6) | Member, Alternate |
| (b)(6) | Statistician Alternate |
| (b)(6) | Attending Veterinarian Alternate |

(b)(6)

Appendix A

RESULTS OF IACUC SEMI-ANNUAL PROGRAM REVIEW AND FACILITY INSPECTION FOR DVBD

FOLLOW-UP RECORD

March 6, 2018

| Location and Item to Fix | (S) or (M)* | Correction Plan | Person Responsible | Corrective Action Performed | Correct by date | Date Corrected |
|---|--------------------|---|---------------------------|------------------------------------|------------------------|----------------------------|
| (b)(6) PI no longer at CDC still listed on white board | M | Remove PI's contact information | (b)(6) | Name and phone number removed | 4-17-2018 | 4-10-2018 |
| (b)(6) Charcoal canister does not have initial weight | M | Train staff on use of charcoal canister | | Training conducted | 4-17-2018 | 3-27-2018 |
| (b)(6) DVBD emergency personnel list outdated (2014) | M | Update list | | List updated | 4-17-2018 | 4-10-2018 |
| (b)(6) Records review - airflow issue, positive to negative and back | NA | Building engineer said it was a computer software issue which will be corrected. There is no airflow problem. | | Correct computer software | No date assigned | In progress as of 5-2-2018 |

*Significant (S) or Minor (M)



Centers for Disease Control and Prevention
Division of Vector-Borne Diseases
3156 Rampart Road
Fort Collins, CO 80851
970-221-6400

MEMORANDUM

To: **Steve Monroe, Ph.D.**
Institutional Official
Associate Director for Laboratory Science and Safety
Office of the Director, Centers for Disease Control and Prevention

From: (b)(6)
Chairperson, CDC-Fort Collins Institutional Animal Care and Use Committee

Subject: Semiannual Evaluation of Animal Care and Use Program and Inspection of Facilities – Division of Vector-Borne Diseases, Fort Collins, CO

Date: October 9, 2018

CC: (b)(6)
ID/NCEZID/DVBD/OD
NCEZID/DVBD/OD
OID/NCEZID/DVBD/OD
ID/NCEZID/DVBD/OD
ID/NCEZID/DVBD/OD
D/NCEZID/DVBD/OD
ID/NCEZID/DSR/OD
ID/ NCEZID/DSR/OD
OID/NCEZID/DSR
D/OADLSS
OD/OADLSS/ACUPO
DVBD Institutional Animal Care and Use Committee (IACUC)

This memorandum documents the September 11, 2018 Semiannual Evaluation of the Centers for Disease Control and Prevention (CDC) – Division of Vector-Borne Diseases animal facility inspection and program review by the Institutional Animal Care and Use Committee (IACUC), as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals and as a condition of this Institution's Animal Welfare Assurance on file with the Office of Laboratory Animal Welfare (OLAW) and United States Department of Agriculture (USDA) Animal Welfare Regulations, 9 CFR Chapter I, subchapter A, as applicable. This evaluation utilized the National Research Council's *Guide for the Care and Use of Laboratory Animals* (2011).

Findings of the September 11, 2018 Semiannual Review of the CDC-Fort Collins Animal Care and Use Program

The CDC-Fort Collins IACUC conducted the Semiannual Evaluation of the Institution's

Animal Care and Use Program on September 11, 2018 using the PHS Policy on Humane Care and Use of Laboratory Animals (PHS Policy), the *Guide for the Care and Use of Laboratory Animals*, 2011 (the “Guide”), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable.

CDC-Fort Collins IACUC members who participated in the Program review included (b)(6) (b)(6) provided administrative support.

A modified OLAW checklist was provided to assist in the assessment. No deficiencies were noted.

The CDC-Fort Collins IACUC members reviewed records and inspected the animal facilities on September 11, 2018 using the PHS Policy on Humane Care and Use of Laboratory Animals, the *Guide for the Care and Use of Laboratory Animals*, 2011 (the “Guide”), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable. Currently approved exceptions to the 2011 Guide were also reviewed.

CDC-Fort Collins IACUC members who participated in the facility inspection included (b)(6) (b)(6) provided administrative support. (b)(6) (all from animal care contractor services) escorted IACUC members and AAALAC site visitors through the animal facilities and/or answered questions.

No significant deficiencies were noted by the IACUC during the facility inspection and records review. There were a few minor deficiencies noted and their status is listed in Appendix A below.

Approved Protocol Exceptions to the Guide

The following are exceptions to the 2011 *Guide* that were reviewed and approved by the IACUC for individual protocols.

Eight (8) approved protocols allow mice to be individually housed on a metal grate for up to 5 days while ticks feed (ticks drop off into ½” of water kept under metal grate, replete ticks are removed from water daily). Mice are provided with a plastic petri dish bottom (as a platform for respite from any discomfort incurred by the metal grate) for days 2-4 before ticks begin dropping off. A mouse hut is provided for additional comfort. Mice are euthanized at the end of the tick-feeding session or returned to regular housing, depending on the study protocol. One protocol allows rabbits to be single-housed with an Elizabethan-collar to facilitate feeding and biocontainment of ectoparasites or to prevent fighting. Six (6) mouse protocols allow pregnant females to be housed individually when they are ready to litter. For the purpose of disease surveillance, one (1) mouse protocol allows for the use of soiled bedding from other cages housing mice placed in cages with SPF mice as a means of exposure.

Program Changes

No IACUC policies were reviewed or updated since the last semi-annual letter to the IO.

Program Exceptions

There were no program exceptions during this period since the last report to the IO.

Names of IACUC Members

Signatures/ Initials

| | |
|--------|-------------------------------------|
| (b)(6) | Chairperson |
| (b)(6) | Member |
| (b)(6) | Nonaffiliated, non-scientist member |
| (b)(6) | Attending Veterinarian Member |
| (b)(6) | Statistician Member |
| (b)(6) | Health and Safety Member |
| (b)(6) | Scientist Member |
| (b)(6) | Scientist Member |
| (b)(6) | Alternate Scientist |
| (b)(6) | Scientist Alternate |
| (b)(6) | Member, Alternate |
| (b)(6) | Statistician Alternate |
| (b)(6) | Attending Veterinarian Alternate |

(b)(6)

Appendix A

RESULTS OF IACUC SEMI-ANNUAL PROGRAM REVIEW AND FACILITY INSPECTION FOR DVBD

FOLLOW-UP RECORD

September 11, 2018

| Location and Item to Fix | (S) or (M)* | Correction Plan | Person Responsible | Corrective Action Performed | Correct by date | Date Corrected |
|--|--------------------|--|---------------------------|--|------------------------|-----------------------|
| (b)(6) Expired red top tubes | M | Discard | (b)(6) | Discarded tubes | 9-18-18 | 9-24-2018 |
| Multiple areas on (b)(6) Emergency Guide Book dated 2008 | M | BioSafety Officer to review, update as needed, and change date | | (b)(6) determined that the emergency guide books need a complete update | 10-26-2018 | In progress |
| (b)(6) Expired sterile saline bottles | M | Discard | | Discarded bottles | 9-18-2018 | 9-17-2018 |
| Apogee Lighting Records Do not reflect correct light cycle, data logger being utilized to verify light cycles | M | Software engineer to correct reports | | Software cannot be corrected, new version upcoming in 2019 that may correct the issue. For now, using data loggers in rooms to ensure | 9-28-18 | To be determined |

| Location and Item to Fix | (S) or (M)* | Correction Plan | Person Responsible | Corrective Action Performed | Correct by date | Date Corrected |
|---|-------------|---|--------------------|---|-----------------|--|
| | | | | BAS system is working correctly | | |
| Rabbit health records for (b)(6) do not have disposition | M | Obtain records from PI for procedures conducted and disposition | (b)(6) | Records from PI provided to (b)(6) for inclusion in their health record | 9-18-2018 | 9-14-2018 |
| Animal Census forms not being fully utilized by investigators, inconsistent | M | Review form, modify as needed, email to all animal users on use of the form | | Form modified | 9-28-2018 | Form revised 9-17-2018 Email to users 10-4-2018 |

*Significant (S) or Minor (M)



Centers for Disease Control and Prevention
Division of Vector-Borne Diseases
3156 Rampart Road
Fort Collins, CO 80851
970-221-6400

MEMORANDUM

To: Steve Monroe, Ph.D.
Institutional Official
Associate Director for Laboratory Science and Safety

From: (b)(6)
Chairperson, CDC-Fort Collins Institutional Animal Care and Use Committee
(b)(6)
Immediate past Chairperson, CDC-FC IACUC

Subject: Semiannual Evaluation of Animal Care and Use Program and Inspection of
Facilities – Division of Vector-Borne Diseases, Fort Collins, CO

Date: November 12, 2019

CC: (b)(6)
DDID/NCEZID/DVBD/OD
DDID/NCEZID/DVBD/OD
DDID/NCEZID/DVBD/OD
DDID/NCEZID/DVBD/OD
DDID/NCEZID/DVBD/OD
DDID/NCEZID/DSR/OD
DDID/NCEZID/DSR/OD
DDID/NCEZID/DSR
OLSS/OLSaf
OLSS/OLSaf/ACUPO
DVBD Institutional Animal Care and Use Committee (IACUC)

This memorandum documents the September 10, 2019 Semiannual Evaluation of the Centers for Disease Control and Prevention (CDC) – Division of Vector-Borne Diseases animal facility inspection and program review by the Institutional Animal Care and Use Committee (IACUC), as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals and as a condition of this Institution's Animal Welfare Assurance on file with the Office of Laboratory Animal Welfare (OLAW) and United States Department of Agriculture (USDA) Animal Welfare Regulations, 9 CFR Chapter I, subchapter A, as applicable. This evaluation utilized the National Research Council's *Guide for the Care and Use of Laboratory Animals* (2011).

Findings of the September 10, 2019 Semiannual Review of the CDC-Fort Collins Animal Care and Use Program

The CDC-Fort Collins IACUC conducted the Semiannual Evaluation of the Institution's Animal Care and Use Program on September 10, 2019 using the PHS Policy on Humane Care

and Use of Laboratory Animals (PHS Policy), the *Guide for the Care and Use of Laboratory Animals*, 2011 (the "Guide"), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable.

CDC-Fort Collins IACUC members who participated in the Program review included

(b)(6)

(b)(6)

provided administrative support.

The modified OLAW checklist was utilized for the review with discussion. No significant deficiencies were noted. One minor deficiency was noted: two IACUC members whose appointments started in January 2019 have not completed the required on-line training (per IACUC Policy 22 should be completed within 60 days of appointment; email to be sent to their supervisors asking that time be provided for them to complete this requirement).

The CDC-Fort Collins IACUC members reviewed records and inspected the animal facilities on September 10, 2019 using the PHS Policy on Humane Care and Use of Laboratory Animals, the *Guide for the Care and Use of Laboratory Animals*, 2011 (the "Guide"), and Title 9 CFR Chapter I, Subchapter A – Animal Welfare Regulations (USDA Regulations), as applicable. Currently approved exceptions to the 2011 Guide were also reviewed.

CDC-Fort Collins IACUC members who participated in the facility inspection include

(b)(6)

(b)(6)

provided administrative support. (b)(6) and

(b) (all from animal care contractor services) escorted IACUC members through the animal facilities and/or answered questions.

No significant deficiencies were noted by the IACUC during the facility inspection and records review. There was one minor deficiency noted: principle investigators and protocol staff are not completing the census forms when animals are euthanized or found deceased. An e-mail reminder was sent out by the IACUC Administrator to all PIs and protocol associates.

Due to continuing reliability and operational issues with the cage and rack washers, preventative maintenance and repair records were reviewed by a subcommittee of the IACUC as part of the semi-annual review. The subcommittee concluded that the provided PM records demonstrated a systematic effort to schedule and complete regular preventative maintenance (PM); and, delays in completing the PM tasks were improving. Also, it appeared that issues directly related to animal welfare had been corrected. On the date of the semi-annual inspection, the tunnel washer had been repaired and were operating as expected. The rack washer had not been operational since June 2019. The subcommittee recommended that the IO consider whether the CDC's Occupational Health & Safety Office should be consulted to determine if continued operation of these units poses any unacceptable risk to operators. None of the provided documentation indicated that a safe operation determination had been made.

Post-meeting note: the rack washer is undergoing a complete rebuild and the tunnel washer received additional repairs and is operating to standards (The Guide for the Care and Use of Laboratory Animals and the Animal Welfare Act and Animal Welfare Regulation) as of the date of this letter.

Approved Protocol Exceptions to the *Guide*

The following are exceptions to the 2011 *Guide* that were reviewed and approved by the IACUC for individual protocols.

Five (5) approved protocols allow mice to be individually housed on a metal grate for up to 5 days while ticks feed (ticks drop off into ½" of water kept under metal grate, replete ticks are removed from water daily). Mice are provided with a plastic petri dish bottom (as a platform for respite from any discomfort incurred by the metal grate) for days 2-4 before ticks begin dropping off. A mouse hut is provided for additional comfort. Mice are euthanized at the end of the tick-feeding session or returned to regular housing, depending on the study protocol.

One protocol allows rabbits to be single-housed with an Elizabethan-collar to facilitate feeding and biocontainment of ectoparasites or to prevent fighting.

Two (2) mouse protocols allow pregnant females to be housed individually when they are ready to litter.

For the purpose of disease surveillance, one (1) mouse protocol allows for the use of soiled bedding from cages housing mice be placed in cages with SPF mice as a means of exposure.

Program Changes

The following IACUC policies were modified:

FTC-007 Protocol Personnel Defined: addition of reference to Policy 29 for occupational health requirements

FTC-025 Anesthesia and Analgesia Guidelines: updated dosages of some anesthetics

FTC-026 Blood Collection Guidelines: requirement added to weigh animals to facilitate calculation of acceptable blood collection volume.

FTC-032 Requesting Animals from the DVBD Mouse Colony: added requirement for PI or protocol associate to be present when mice approximately 3 weeks of age are delivered to verify sex.

Program Exceptions

There were no program exceptions since the last report to the IO.

Names of IACUC Members

Signatures/ Initials

(b)(6)

Chairperson

(b)(6)

Past Chairperson

(b)(6)

Scientist Member

(b)(6)

Scientist

(b)(6)

Member

(b)(6)

Nonaffiliated, non-scientist member

(b)(6)

Attending Veterinarian Member

(b)(6)

Statistician Member

(b)(6)

Health and Safety Member

(b)(6)

Animal Care Project Manager

(b)(6)

Alternate Scientist

(b)(6)

Alternate scientist

(b)(6)

Member, Alternate

(b)(6)

Statistician Alternate

(b)(6)

Attending Veterinarian Alternate

(b)(6)

Alternate Nonaffiliated, non-scientist member

(b)(6)

Appendix A

RESULTS OF IACUC SEMI-ANNUAL PROGRAM REVIEW AND FACILITY INSPECTION FOR DVBD

FOLLOW-UP RECORD

September 10, 2019

| Location and Item to Fix | (S) or (M)* | Correction Plan | Person Responsible | Corrective Action Performed | Correct by date | Date Corrected |
|--|--------------------|---|---------------------------|--|------------------------|-----------------------|
| Animal census forms | M | Remind PIs and protocol associates to document number of animals euthanized or found dead | (b) (6) | E-mail sent out to all PIs and protocol associates | Not specified | 9-18-2019 |
| 2 new IACUC members out of compliance with Policy 22 – Training of IACUC Members; on-line training not completed | M | Send email reminders to the members and copy supervisors requesting time be allotted to complete the on-line training | | Email sent as specified with correct by date. | September 23, 2019 | 10-2-2019 |

*Significant (S) or Minor (M)