Annual Report to OLAW

Institution: Southern Illinois University School of Medicine, Springfield Campus

Assurance Number: D16-00132

Reporting Period: January 1, 2020 to September 30, 2020

This institution's Institutional Animal Care and Use Committee (IACUC), through the Institutional Official, provides this annual report to the Office of Laboratory Animal Welfare (OLAW).

I. Program Changes [Select A or B]

- [] A. There have been **no changes** in this institution's program for animal care and use as described in the Assurance. [*Skip to Item II.*]
- [X] B. Change(s) in this institution's program for animal care and use as described in the Assurance have occurred during this reporting period. (FAQ 6)

Select all that apply:

- [] This Institution's AAALAC accreditation status has changed (PHS Policy IV.A.2.).
 - [] <u>AAALAC Accredited</u> Category 1
 - [] Non-Accredited Category 2
- [X] This institution's program for animal care and use has changed (<u>PHS Policy IV,A,1,a-i.</u>). [Attach a full description of the changes. **ATTACHED**]
- [] The individual designated by this institution as the Institutional Official has changed. [Provide name, title(s), address, e-mail, phone, and fax numbers in Item V.]
- [X] The membership of this institution's IACUC has changed. [Provide current roster of members in Item VI.]

II. Semiannual Evaluations

This IACUC has conducted semiannual evaluations of the institution's program and inspections of the institution's facilities (including satellite facilities) on the dates below. Reports of the evaluations and inspections have been submitted to the Institutional Official. The reports include any IACUC-approved departures from the *Guide* with a reason for each departure, any deficiencies (significant or minor) that were identified, and a plan and schedule for correction of each deficiency. [*Do not provide semiannual reports unless they include a minority view.*]

A. Program Evaluations

[Two dates (month/day/year) must be provided to satisfy the PHS Policy requirement that evaluations be done at 6 month intervals. If the IACUC conducted more than 2 evaluations of the program during the reporting period, please attach a list showing the dates.]

Date 1: 1/27/20 Date 2: 5/18/20

B. Facility Inspections

[Two dates (month/day/year) must be provided to satisfy the PHS Policy requirement that facility inspections be done at 6 month intervals. If the IACUC conducted more than 2 inspections of each site during the reporting period, please attach a list showing the dates.]

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III. Minority Views [Select A or B]

- [X] A. There were **no minority** views during this reporting cycle.
- [] B. Any minority views submitted by members of the IACUC regarding reports filed under <u>PHS</u> <u>Policy IV.F.</u> for this reporting cycle are attached.

IV. Signatures

IACUC Chairperson	Institutional Official	
Name: Shelley A. Tischkau, Ph.D.	Name: Jerry Kruse, MD, MPH	
(b) (6)	(b) (6)	
Signature:	Signature:	
Date: 10/26/20 🖉	Date: 10/26/20	

V. Change in Institutional Official

Name:					
Title:	Degree/Credential:				
Name of Institution:					
Address: [street, city, state, zip code]					
E-mail:					
Phone:	Fax:				

VI. Change in IACUC Membership [Current roster]

Institution: Southern Illinois University School of Medicine, Springfield Campus							
IACUC Contact Information							
Address: [street, city, state, zip code] P.O. Box 19616 Springfield, IL 62794							
E-mail: (b) (6) @siumed.edu							
Phone: (b) (6)			Fax:				
IACUC Chairperson							
Name: Shelley A. Tisch	kau						
Pharmacology, Medical M Immunology, & Cell Biol	Title: Professor & Chair, Departments of Pharmacology, Medical Microbiology, Immunology, & Cell Biology (MMICB)		Degree/Credentials: Ph.D.				
PHS Policy Membership	Requirements***: So	ient	íst				
IACUC Roster [Provide	below or attach]						
Name of Member/ Code*	Degree/ Credential	00	sition Title/ cupational ckground**	PHS Policy Membership Requirements***			
Shelley A. Tischkau	Ph.D.	Pro	CUC Chair, ofessor of	Scientist			
			(b) (6)	Scientist/Clinician			
				Scientist			
				Scientist			
				Non-Affiliated and Non- Scientific			
				Scientist			
				Scientist			
Helen Valentine	DVM, MS, DACLAM	Dep Mic Imr	ociate Professor, ot. of Medical robiology, munology & Celi logy	Attending Veterinarian and Scientist			
			(b) (6)	Scientist			
				Non-Scientist			
				Scientist			

(b) (б)	
	Non-Scientist
	Non-Scientist
	Non-Scientist

* Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this report to OLAW. Sufficient information to determine that all appointees are appropriately qualified must be provided and the identity of each member must be readily ascertainable by the institution and available to authorized OLAW or other PHS representatives upon request.

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

*** PHS Policy Membership Requirements:

- Veterinarian with training or experience in laboratory animal science and medicine or in the use of the species at the institution, who has direct or delegated program authority and responsibility for activities involving animals at the institution.
- Scientist practicing scientist experienced in research involving animals.
- *Nonscientist* member whose primary concerns are in a nonscientific area (for example, ethicist, lawyer, member of the clergy).
- Nonaffiliated individual who is not affiliated with the institution in any way other than as a member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user. A consulting veterinarian may not be considered nonaffiliated.

[Note: all members must be appointed by the CEO (or individual with specific written delegation to appoint members) and must be voting members. Non-voting members and alternate members must be so identified.]

Changes to SIU School of Medicine Institution's OLAW Assurance:

 Section III.D.2: (During semi-annual inspection, IACUC will only inspect laboratories in which live animal work is conducted, instead of every laboratory that has an active IACUC protocol; many laboratories do not bring any live animals to the lab)

The IACUC procedures for conducting semi-annual facility inspections are: All IACUC members are invited to participate. Subcommittees of at least two IACUC voting members are assigned to visit the DLAM animal facility and all laboratories which have an active animal protocol in which live animal work is conducted. The inspection process usually requires one day, but may be expanded to two or more days if scheduling conflicts arise. Subcommittees visit all animal use areas, examine relevant equipment and supplies, and question personnel concerning animal use. Members of the Office of Environmental Health and Safety are invited to accompany the IACUC subcommittee, but may not participate if they have recently conducted (or will be conducting) a similar inspection of DLAM and investigator labs. Committee members are provided with forms/checklists (based on OLAW's suggested Semi-Annual Facility Inspection Checklist to guide their inspection.)

- Section III.D.6: (IACUC protocol review process has not changed, but now all IACUC members have provided written confirmation that they approve of the IACUC Protocol Review Policy)
 The protocol review procedures outlined above are described in IACUC Policy: Protocol Review Process. This Policy will be was last reviewed at the July 2020 IACUC meeting and written consent of approval will be was obtained from all IACUC members.
- 3. Section III.D.9: (Annual review form was discontinued for non-USDA covered animal protocols in order to reduce unnecessary administrative burden)

For annual reviews (all species, not only of protocols involving USDA-covered species), the IACUC administrator provides the PIs with a one-page form to complete and return. The form lists the PI's name, protocol title, number, protocol expiration date, the number of animals used to date, and the number approved. It requests that the PI briefly summarize experiments conducted and any findings during the past year. Other questions ask:

- a. If research was performed, was it performed as approved in the protocol by the IACUC? If the answer is no, they must explain.
- b. Were there any unanticipated effects on the animals? If the answer is yes, they must explain.
- c. Have cell lines or other rodent-derived biologics been injected into animals as part of this protocol? If the answer is yes, they must attach the annual mycoplasma test method, date and results.
- d. Does the protocol require any new amendments? If the answer is yes, they must explain.