Annual Report to OLAW

Institution: North Carolina State University					
Assurance Number: D16-00214					
Reporting Period: January 1 – December 31 2019					

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).

Program Changes [Select A or B] I.

ΓΥΊ

[X]	A.		nere have been no changes in this institution's program for animal care and use as escribed in the Assurance. [Skip to Item II.]		
[]	В.		hange(s) in this institution's program for animal care and use as described in the Assurance ave occurred during this reporting period. ($\overline{\text{FAQ 6}}$)		
	Select all that apply:				
	[]	This institution's AAALAC accreditation status has changed (PHS Policy IV.A.2.).		
			[] AAALAC Accredited – Category 1		
			[] Non-Accredited – Category 2		
	[]	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.]		
	[]	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.]		
	[]		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.]

B. Facility Inspections

Multiple sites and dates – see table below:

COS: College of Sciences

CALS: College of Agriculture and Life Sciences

CVM: College of Veterinary Medicine

Laboratory, Unit or Building	First Inspection Date	Second Inspection Date
COS site 1	January 07 2019	July 08 2019
CALS site 1	January 07 2019	July 09 2019
COS/ CALS site 2	January 08 2019	July 10 2019
COS site 3 (moved locations)	January 08 2019	Closed
	April 24 2019	Sept 16 2019
CVM site 1	March 04 2019	Sept 10 2019
	April 02 2019	October 8 2019
	April 03 2019	October 7 2019
CALS site 3	March 05 2019	Sept 9 2019
CVM site 2	April 01 2019	October 02 2019
CVM site 6	April 17 2019	October 15 2019
CVM site 3	April 24 2019	October 9 2019
CVM site 4	May 01 2019	November 06 2019
COS site	May 02 2019	November 05 2019
CVM site 5	May 06 2019	November 13 2019
CVM site 5	July 09 2019	November 13 2019

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: William Flowers	Name: Richard Best	
(b) (6) Digitally signed by WI. Flowers Div. cn::WI. Flowers on-North Carolina State University ou:-Department of An mail Science email-of owersign.csu edu -c-US. Date: 2020 01 27 11:37:47 05907 Signature:	Richard E Best Date: 2020.01.27 11:07:23-05'00' Signature:	
Date:	Date:	

V. Change in Institutional Official N/A

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

VI. Change in IACUC Membership N/A