Name: Long Island University - LIU Post Campus [A057]

FOR OF	FICE USE ONLY
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Code	A057
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NEW YORK STATE DEPARTMENT OF HEALTH WADSWORTH CENTER LABORATORY ANIMAL WELFARE PROGRAM EMPIRE STATE PLAZA, P.O. BOX 509 ALBANY, NEW YORK 12201-0509

#### 2019 RENEWAL APPLICATION FOR APPROVAL FOR USE OF LIVING ANIMALS

## SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

CURRENT DATA	INDICATE CHANGES HERE
Laboratory/Institution Name:	
Long Island University - LIU Post Campus	
Address 1:	
720 Northern Blvd.	
Address 2:	
·	·
City, State, Zipcode:	
Brookville, NY 11548	
County:	
Nassau	
Telephone Number:	
516-299-2839	
Fax Number:	
516-299-3105	4
E-mail Address:	
christopher.mcallister@liu.edu	

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AW-APP01(10/2007)

ploaded to Animal Research Laboratory Overview (ARLO) on 06/29/202

## SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

Ownership:				•
☐ Corporation☐ Other:	☐ Government	□ Individual 	X Not For Profit	□ Partnership
Facility Type:			,	
☐ 2 Year College ☐ Hospital ☐ Public Health La ☐ Other:	·	1 Year College Medical School Research & Develo		or Environmental Lab Testing Lab ry School

## **SECTION II - PROGRAM INFORMATION**

Animals (Check all that apply):	
Animais (Check an that apply).	
Mice (genus mus) □ Hamsters □ Sheep/Goats □ Mice (wild or other) □ Guinea Pigs □ Cats □ Cattle      Rats (genus rattus) □ Rabbits □ Dogs □ Swine □ Rats (wild or other) □ Small Birds □ Non-Human Primates □ Poultry □ Other: □ Other: □ Non-Human Primates □ Poultry	
Are you currently housing live animals at your institution?   ▼ Yes □ No	
If you are not currently housing live animals, do you anticipate having live animals in your facility during the next 12 months?* ☐ Yes ☐ No	
*LAWP permits are issued to those institutions that maintain living animals for teaching and/or research and have the appropriate programs and facilities to properly and humanely care for those animals.	
Does your laboratory/institution have an Animal Care Committee?   ☐ Yes ☐ No (If Yes, attach a copy of the Committee members)	
Since your last application, have there been any changes in your animal care and use procedures (i.e. feeding programs, disease control, environmental management, humane care, euthanasia)?	
Note: Any procedures that require the withholding of feed and water or exposing the animals to adverse or unusual conditions should be documented in your animal use protocols and approved by your IACUC.	·
Living animals are used for (Check all that apply):	
<ul> <li>□ Diagnostic Procedures</li> <li>☑ Experimentation</li> <li>□ Public Display</li> <li>□ Other:</li> <li>□ Diagnostic Procedures</li> <li>☑ Education/Teaching Demonstrations</li> <li>□ Farm Production</li> <li>□ Public Health/Disease Survellience</li> </ul>	
Are animals used in studies with human infectious agents?   Yes  No  (If Yes, attach a copy of your procedures for processing medical waste generated by the animals)	
Registration/Accreditation Type:	
□ AAALAC Accredited	

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## **SECTION III - PERSONNEL INFORMATION**

(	CURRENT DATA	INDICATE	CHANGES HERE		
Laboratory/Institution Person In Charge (Name): Evelyn, Alan			Sischo, Lacey		
Title: Director, Office of Sponsored Research			inistratir		
oer:		516 299	3591		
		Work Hours:			
to to to to to	5:00 pm 5:00 pm 5:00 pm 5:00 pm 5:00 pm	Mon: to Tue: to Wed: to Thu: to Fri: to Sat: to			
	f Spons ber:  n to n to n to n to n to n to	f Sponsored Research  ber:  n to 5:00 pm	### Sischo   Lacut Adm   Lacut		

CURRENT DATA	INDICATE CHANGES HERE
Veterinarian in Charge (Name):	
Zimmerman, Thomas	
Title:	
Consulting Veterinarian	
Telephone Number:	
631-444-6978	
Work Name/Address (if different from laboratory/institution):	
Stony Brook University Basic Science Tower, Levell, Room 223 Stony Brook, NY 11794-8611	
Work Hours:	Work Hours:
to	Mon: to
to	Tue: to
to	Wed: to
to	Thu: to
to	Fri: to
to	Sat: to
to	Sun: to

#### **SECTION III - PERSONNEL INFORMATION**

		C	URRENT DATA		INDICATE CHANGES HERE	
Contac	t Person (N	ame)				
McAllis	ter, Christopl	ner J.				
Title:	- Allen - Alle		1			
Directo	r					
Teleph	one Number	r:		,	·	
516-29	9-2839					
Work H	Hours:			Work Hours	:	
MON:	9:00 am	to	5:00 pm	Mon:	to	
TUE:	9:00 am	to	5:00 pm	Tue:	to	
WED:	9:00 am	to	5:00 pm	Wed:	to	
THU:	9:00 am	to	5:00 pm	Thu:	to	
FRI:	9:00 am	to	5:00 pm	Fri:	to	
	,	to		Sat:	to	
		to		Sun:	to	

X	Attach a list of all full-time and part-time animal care staff which includes the following information:
	Name, Full-Time or Part-Time, Title and Education Level (Highest).

☐ No additional staff.

#### **SECTION IV - ATTESTATION**

I have read the Administrative Rules and Regulations concerning the use of living animals and understand that I am fully responsible for all work involving the use of living animals. I understand that the Certificate of Approval is not transferable and the New York State Department of Health (the Department) shall be advised promptly if the individual, in whose name approval has been granted, ceases to be in charge. The facility(ies) will be operated according to all applicable laws, rules and regulations.

I understand that by signing this application form I agree to cooperate with any investigations conducted by the Department to verify or confirm information given or any other investigation conducted in connection with animal welfare in any facility identified in this application. If additional information is requested, I will provide it.

In signing this application, I hereby certify that the information I have given the Department as a basis for obtaining or retaining a certificate of approval is true and correct. As information changes, I will promptly notify the Department. Further, I understand that filing a false instrument constitutes a crime under the Penal Law of the State of New York.

Signature, Laboratory//nstitutional Officer

IACUC Administrator

/0/15/18/ Date

## SECTION V - ADDITIONAL SITES WHERE LIVING ANIMALS ARE LOCATED

FIELDS	NEW SITE DATA
Site Name:	
Address 1:	
Address 2:	
City, State, Zipcode:	·
Site Telephone Number:	
Site Fax Number:	
Site E-mail Address:	
Contact Person (Name):	
FIFT DO	NEW SITE DATA
FIELDS Site Name:	NEW SHE DATA
Address 1:	
Address 2:	
City, State, Zipcode:	
Site Telephone Number:	
Site Fax Number:	
Site E-mail Address:	
Contact Person (Name):	
FIELDS	NEW SITE DATA
Site Name:	NEW SITE DATA
Site Name: Address 1:	NEW SITE DATA
Site Name: Address 1: Address 2:	NEW SITE DATA
Site Name: Address 1: Address 2: City, State, Zipcode:	NEW SITE DATA
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number:	NEW SITE DATA
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number:	NEW SITE DATA
Site Name:  Address 1:  Address 2:  City, State, Zipcode:  Site Telephone Number:  Site Fax Number:  Site E-mail Address:	NEW SITE DATA
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number:	NEW SITE DATA
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number: Site E-mail Address: Contact Person (Name):	NEW SITE DATA
Site Name:  Address 1:  Address 2:  City, State, Zipcode:  Site Telephone Number:  Site Fax Number:  Site E-mail Address:  Contact Person (Name):	
Site Name:  Address 1:  Address 2:  City, State, Zipcode:  Site Telephone Number:  Site Fax Number:  Site E-mail Address:  Contact Person (Name):	
Site Name:  Address 1:  Address 2:  City, State, Zipcode:  Site Telephone Number:  Site Fax Number:  Site E-mail Address:  Contact Person (Name):  FIELDS  Site Name:	
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number: Site E-mail Address: Contact Person (Name):  FIELDS Site Name: Address 1:	
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number: Site E-mail Address: Contact Person (Name):  FIELDS Site Name: Address 1: Address 2:	
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number: Site E-mail Address: Contact Person (Name):  FIELDS Site Name: Address 1: Address 2: City, State, Zipcode:	
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number: Site E-mail Address: Contact Person (Name):  FIELDS Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number:	
Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number: Site E-mail Address: Contact Person (Name):  FIELDS Site Name: Address 1: Address 2: City, State, Zipcode: Site Telephone Number: Site Fax Number:	

## **SECTION II – PROGRAM INFORMATION**

## LIU Post IACUC membership:

- Dr. Grace Rossi IACUC Chair/Psychology Dept.
- Dr. Thomas Zimmerman Attending Veterinarian/Consulting DVM
- Mr. Chris McAllister **Non-Scientist**/Animal Facility Director
- Mr. Harry Faustmann Non-Affiliated/Law Enforcement
- Dr. Jennifer Snekser Scientist/Biology Dept.
- Dr. Karin Melkonian Alternate Scientist/Biology Dept.
- Mr. Bill Hoefer Alternate Non-Affiliated/Delivery Service

# **SECTION III – PERSONNEL INFORMATION**

Name	Full-time/Part-time	Title	Education Level (Highest)
Christopher McAllister	Full-time	Animal Facility Director	B.A.
Thomas Zimmerman	Part-time	Attending Veterinarian	DVM
Kaili DeSantis	Part-time	Animal Care-taker	H.S.
Alexandra Maher	Part-time	Animal Care-taker	H.S.

### NEW YORK STATE PUBLIC HEALTH LAW

Article 5, Title I - General Provisions: State Laboratories; Approved Laboratories

Section 504. Laboratories; scientific tests on living animals; rules; approval.

- 1. The commissioner is authorized to designate approved laboratories or institutions wherein properly conducted scientific tests, experiments or investigations, involving the use of living animals, may be performed or conducted.
- 2. (a) The commissioner shall promulgate rules under which such approvals shall be granted, and shall cause such rules to be published, and copies thereof shall be conspicuously posted in each such laboratory or institution.
  - (b) Such rules of the commissioner shall include requirements that all animals shall be kindly and humanely treated, properly fed and suitably housed, and that commensurate with experimental needs and with the physiologic function under study, all tests, experiments and investigations involving pain shall be performed under adequate anesthesia.
- 3. The commissioner or his duly authorized representative shall inspect such laboratories or institutions to insure compliance with the rules and standards promulgated by him.
- 4. (a) The approval of a laboratory or institution by the commissioner for the purposes herein set forth shall be limited to a period not exceeding one year but may be renewed from year to year upon proper application to the commissioner.
  - (b) Each such approval may be revoked at any time for failure to comply with the rules promulgated by the commissioner.
- 5. The performance of animal experimentation without approval by the commissioner as herein provided shall constitute a misdemeanor.

Section 505-a. Purchase of certain animals for scientific tests.

It shall be unlawful for any laboratory or institution approved under this article, to purchase any dog or cat for experimental purposes unless the seller thereof shall provide proof of ownership of the animal of a sufficiency prescribed by the commissioner. Every such laboratory or institution shall keep a record of each such purchase with the name and address of the seller and a copy of the proof of ownership given at the time of the transaction.

# TITLE 10 NEW YORK CODES, RULES AND REGULATIONS

## Subpart 55-1 Approval of Laboratories and Institutions for Use of Living Animals

Section 55-1.1 Purposes for which approval may be granted.

- Approval may be granted laboratories and institutions for the use of living (a) animals in properly performed or conducted scientific tests, experiments, or investigations, including educational demonstrations. Living animals include living mammals and birds.
- Approval will not be granted to laboratories or institutions for the use of living (b) animals unless evidence is presented that the general research or teaching program of the institution or laboratory will contribute to the understanding of the problems of human or animal health.

Section 55-1.2 Eligibility for approval.

Only laboratories or institutions will be approved in which the use of living animals for the above purposes will be under the immediate supervision of persons qualified by training and experience to conduct scientific work.

Section 55-1.3 Method of approval.

Application for approval shall be made on forms provided by the State Department of Health. Approval will be granted to a laboratory or institution in the name of the person who is the highest level administrator in that laboratory or institution. The certificate of approval is not transferable and the State Department of Health shall be advised promptly if the individual in whose name approval has been granted shall cease to be in charge.

Section 55-1.4 Responsibility.

- The individual whose name appears on the certificate of approval shall be (a) responsible for all of the experimentation that involves the use of living animals in the designated laboratory or institution. Such individual shall designate one person to be in charge of animal care. That person shall be responsible for the animals' care regardless of whether that person is physically within or away from the laboratory or institution.
- The laboratory or institution shall have an animal care committee which shall (b) review the propriety of the procedures used and the scientific justification for the use of animals in experiments, tests, and investigations, including educational demonstrations.

Section 55-1.5 Care and treatment of animals.

The laboratory of institution shall give careful consideration to the humane (a) treatment of animals wherever located. This includes any off-premises locations which are not considered part of the laboratory or institution. The food given to the animals shall be wholesome and in sufficient quantity for the type of animal and scientific tests. The animals' quarters shall be kept clean, well lighted and ventilated and be maintained at a proper temperature. Quarters or cages of suitable size shall be provided so that each animal may stand, sit, and lie in a normal position and turn around with ease. All quarters and cages shall be kept clean, and after they are vacated and before they are reoccupied shall be cleaned by procedures suitable to prevent spread of communicable diseases.

- (b) Laboratories and institutions providing transportation for animals must arrange for their humane handling during their transportation to and from the laboratory or institution.
- (c) Pain and discomfort shall be minimized by proper use of tranquilizers, analgesics, and anesthetics. Exceptions may be made when provisions for maximum comfort, including the use of tranquilizers, analgesics and anesthetics, would defeat the purpose of the experiment. Any exceptions are to be made only after having received the recommendations of the person in charge of animal care.
- (d) If animals are to be killed they must be killed humanely.
- (e) Humane methods for killing animals shall include but not to limited to the following:
  - (1) inhalant agents such as carbon dioxide for small rodents;
  - (2) non-inhalant pharmacological agents such as:
    - (i) barbituric acid derivatives; and
    - (ii) a combination of chloral hydrate, magnesium sulfate and sodium pentabarbital for large animals;
  - (3) physical methods such as decapitation for small animals.
- (f) Inhumane methods which are prohibited shall include but not be limited to the following:
  - (1) non-inhalant pharmacological agents such as:
    - (i) chloral hydrate alone;
    - (iì) strychnine;
    - (iii) magnesium sulfate alone; or
    - (iv) curariform drugs or agents with curariform activity;
  - (2) physical methods such as:
    - (i) drowning; or

# (ii) exsanguination without causing prior unconsciousness.

Section 55-1.6 Interpretation.

In meeting the requirements of this Subpart for adequate sanitation, ventilation, food, temperature and space, the standards set out in the latest edition of the "Guide for the Care and Use of Laboratory Animals," DHEW Publication No. (NIH) 78-23, published by the U.S. Department of Health and Human Services, shall be used as a guide.

Section 55-1.7 Applicability.

This Subpart shall not apply to elementary or secondary schools under the jurisdiction of the State Education Department.