Name: Roswell Park Cancer Institute [A029]

FOR O	FFICE USE ONLY
Recd Code	A029

### 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:	
Roswell Park Cancer Institute	
Address 1:	
Elm & Carlton Streets	
Address 2:	
City, State, Zipcode:	
Buffalo, NY 14263-0001	
County:	
Erie	
Telephone Number:	
716-845-5914	
Fax Number:	
716-845-8221	
E-mail Address:	
sandra.sexton@roswellpark.org	

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AW-APP01(10/2007)

on 06/29/2021

### SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

Ownership:				
□ Corporation □ Other:	⊠ Government	Individual	□ Not For Profit	☐ Partnership
Facility Type:				
<ul> <li>○ 2 Year College</li> <li>⋈ Hospital</li> <li>○ Public Health L</li> <li>○ Other:</li> </ul>		4 Year College Medical School Research & Develo	⊡ Clinical c ⊡ Product oment Lab ⊡ Veterina	
· · · · · · · · · · · · · · · · · · ·				

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### **SECTION II - PROGRAM INFORMATION**

Animals (Check all that apply):		
<ul> <li>Mice (genus mus)</li> <li>☐ Hams</li> <li>☐ Mice (wild or other)</li> <li>☐ Guine</li> <li>№ Rats (genus rattus)</li> <li>□ Rats (wild or other)</li> <li>□ Small</li> <li>№ Other: Marmota monas (Woodchu</li> </ul>	a Pigs	☐ Sheep/Goats ☐ Cattle ⊠ Swine Primates □ Poultry
Are you currently housing live ani	mals at your institution? 🛛 🕅 Ye	es 🗇 No
If you are not currently housin having live animals in your fac	g live animals, do you anticipate sility during the next 12 months?*	🗆 Yes 🗇 No
*LAWP permits are issued to those in animals for teaching and/or research and facilities to properly and humane	and have the appropriate programs	
Does your laboratory/institution ha	ave an Animal Care Committee?	⊠ Yes □ No
Since your last application, have to animal care and use procedures ( control, environmental management (If Yes, please explain)	(i.e. feeding programs, disease	🗈 Yes 🛝 No
Note: Any procedures that require water or exposing the anim conditions should be docun protocols and approved by	als to adverse or unusual nented in your animal use	
Living animals are used for (Ch	eck all that apply):	a a series a A series a s A series a s
<ul> <li>Diagnostic Procedures</li> <li>∞ Experimentation</li> <li>□ Public Display</li> <li>∞ Other: Reagent Production</li> </ul>	🗌 Farm Produc	aching Demonstrations tion /Disease Survellience
Are animals used in studies with I (If Yes attach a copy of your procedures for proc	human infectious agents? $\mathbb{N}$ is cessing medical waste generated by the animals?	Yes D No
Registration/Accreditation Type	9:	
X AAALAC Accredited □ Other:	⊠ USDA Registered	None
1 	· · · · · · · · · · · · · · · · · · ·	الم
AW-APP01(10/2007)		
·	Helender (1997-Autor)	Obtained by Rise for Ani

### SECTION III - PERSONNEL INFORMATION

CURRENT DATA	INDICATE CHANGES HERE
Laboratory/Institution Person In Charge (Name):	
Odunsi, Adekunle	
Title:	
Deputy Director, Chair of Gynecologic Oncology	
Telephone Number:	
716-845-8376	
110-040-001/0	
	Work Hours:
Work Hours:	
MON: 8:00 am to 5:00 pm	Mon: to
TUE: 8:00 am to 5:00 pm	Tue: lo
WED: 8:00 am to 5:00 pm	Wed: to
THU: 8:00 am to 5:00 pm	Thu: to
FRI: 8:00 am to 5:00 pm	Fri: to
to	Sat: to
lo	Sun: to
CURRENT DATA	INDICATE CHANGES HERE
Veterinarian in Charge (Name):	
Sexton, Sandra	
Title:	
Facility Director Lab Animal Resources	······
Telephone Number:	
716-845-4463	
Work Name/Address (if different from laboratory/institution)	
Roswell Park Cancer Institute	
Elm & Carlton Streets	
Buffalo, NY 14263	
Work Hours:	Work Hours:
	Mon: to
MON: 8:00 am to 5:00 pm	Mon: to Tue: to
TUE: 8:00 am to 5:00 pm	Wed: to
WED: 8:00 am to 5:00 pm	Thu: to
THU: 8:00 am to 5:00 pm	Fri: to
FRI: 8:00 am to 5:00 pm	Sat: to
to	Sun: to
to	

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### SECTION III - PERSONNEL INFORMATION

CURRENT DATA		IN	INDICATE CHANGES HERE			
Contac	t Person (N	lame)	•		· · ·	
Sexton	, Sandra					
Title:						
Facility	Director Lal	b Anir	nal Resources			
Teleph	one Numbe	er:		· · · ·		
716-84	5-4463					
				· ·		
		 •	······			
Work H	lours:	,		Work Hours:		······································
MON:	8:00 am	to	5:00 pm	Mon:	to	
TUE:	8:00 am	to	5:00 pm	Tue:	to	
WED:	8:00 am	to	5:00 pm	Wed:	to	
THU:	8:00 am	to	5:00 pm	Thu:	to	
FRI:	8:00 am	to	5:00 pm	Fri:	to	
		to	-	Sat:	to	
		to		Sun:	to	

- 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. Deputy Director + Chair of Gynecologie oneology Title

Signature, Laboratory/Institutional Officer

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### 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):	

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):	
	and any second

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):	

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):	

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# Institute Animal Care and Use Committee Roster

Name	Department	Phone
Moser, Michael Ph.D. (chair)	Pharmacology & Therapeutics/ORSP: Carlton A-457	1155
Antoch, Marina (Deputy Chair)	Pharmacology & Therapeutics: MRC 458B	3429
Bakin, Andrei Ph.D.	Oncology, Cancer Genetics & Genomics BLSB L2-318	1033
Barbi, Joseph Ph.D.	Immunology; BLSB L5-315	1189
Biersbach, Ron	Community Member	627-3170
Brackett, Craig Ph.D.	Cell Stress Biology; BLSB L3-130	3948
Burkhart, Catherine Ph. D. (Deputy alt)	Buffalo BioLabs, Inc.	849-6810 x330
Curtin, Leslie D.V.M.	LASR: MRC 256	7621
Gerber, Nicole Ph.D.	Occupational & Environmental Safety: S264	4351
Harvey, Richard DRPH	Radiation Safety: Carlton A-201	1048
Magner, William Ph.D.	Head & Neck Surgery CCC 212	1646
Niedermeyr, John	Community Member	907-4666
Sexton, Sandra D.V.M.	LASR: MRC 261	4463
Spierto, Carol	LASR: MRC 269	5732

Wicher, Camille PhD, Esq., R.N., MSN	Institute Official	8649
Handley, Don MBA, MS	Executive Director ORSP	3455
<b>Administration:</b> Herter, Linda CPIA Pusateri, Heather CPIA	Supv. RSP Specialist, IACUC Sr. RSP Specialist, IACUC	8853 3169



John Niedermeyr

SOP TITLE: Decontamination of Biological and Chemical hazard materials in Animal Caging

DATE OF ORIGIN: SOP No: DATE OF REVISION: EFFECTIVE DATE OF THIS 2.3 5/21/04 4/9/18 (5) SOP: 04/16/2018 **REFERENCES: SOP 1.2 Dress Within RPCIC Animal Facility; SOP 5.17 Operation of** Medical Research Complex (MRC) autoclayes: large autoclaye: 1st floor (LST 1), small autoclave; 1st floor (LST 2), small autoclave; 4th floor (LST 3); SOP 5.18 Cancer Cell Center (CCC) Autoclave Operation

DISTRIBUTION: LASR Facility Director/Attending Veterinarian; LASR Administor; LASR Operations Manager; LASR Clinical Veterinarian; LASR Supervisory Staff; LASR Staff

- 1. AUTHOR: Sandra Sexton, DVM, DACLAM <u>TITLE</u> Facility Director
  - SIGNATURE

<u>DA</u>TE 413.18

2. APPROVAL: SOP Committee TITLE

SIGNATURE

DATE

- 3. PURPOSE: To outline the proper cage decontamination for personnel safety when biological and/or chemical hazardous materials are used in animals.
- 4. SCOPE: This SOP applies to LASR staff processing cages from animals that have received Biological and/or Chemical hazardous materials.

### 5. MATERIALS AND EOUIPMENT:

- a. Medical Waste cardboard boxes
- b. Red Medical Waste bags
- c. Tape
- d. Marker

#### 6. **DEFINITIONS:**

- a. BIOHAZARD: a biological agent or condition that is a hazard to humans or the environment
- b. CHEMICAL HAZARD: a chemical for which acute or chronic health
- effects may occur in exposed employees. Chemicals covered by this definition include carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents that act on the hematopoietic system, and agents that damage the lungs, skin, eyes, or mucous membranes.

### 7. PROCEDURE:

- a. Identify cages that have Bio-hazards by the red sticker on the cage card during cage changing days.
- b. Transfer the animals to clean cages and place the dirty cage on a rack with an appropriate label that reads: "MATERIALS ON THIS RACK MUST BE DECONTAMINATED BY AUTOCLAVING PRIOR TO CAGE PROCESSING"

SOP TITLE: Decontamination of Biological and Chemical hazard materials in Animal Caging

SOP No:DATE OF ORIGIN:DATE OF REVISION:EFFECTIVE DATE OF THIS2.35/21/044/9/18 (5)SOP: 04/16/2018REFERENCES: SOP 1.2 Dress Within RPCIC Animal Facility; SOP 5.17 Operation ofMedical Research Complex (MRC) autoclaves: large autoclave; 1st floor (LST 1), smallautoclave; 1st floor (LST 2), small autoclave; 4th floor (LST 3); SOP 5.18 Cancer Cell Center(CCC) Autoclave Operation

**DISTRIBUTION:** LASR Facility Director/Attending Veterinarian; LASR Administor; LASR Operations Manager; LASR Clinical Veterinarian; LASR Supervisory Staff; LASR Staff

- c. Identify the cages that have Chemical hazard by the yellow stickers on the cage card during cage changing day.
- d. Transfer the animals to clean cages and place the dirty cages on the rack that will be taken to the cage decontamination area for proper processing using a soiled bedding transfer station.
- e. Identify the cages that have both red and yellow stickers on the cage card during cage changing day.

f. Transfer the animals to clean cages and proceed to place the cages on the rack that will be taken to the chemical decontamination area for proper processing using a soiled bedding transfer station.

- i. When a rack labeled for "AUTOCLAVE" is full, take it to the fourth floor and place in the hallway in the vicinity of the "Sterilizer Room" (room M477).
- ii. Check all cages visually to make sure that no animals are in them.
- iii. Sterilize the full rack following (SOP 5.17).
- iv. Upon completion, deliver racks to the first floor (room M195). Push rack(s) through the double- doors for routine soiled cage processing.
  - v. When a rack labeled for "CHEMICAL DECONTAMINATION" is full, take it to the room where the soiled bedding processing station units or "dump stations" are located.
- g. LASR Personnel working the Soiled bedding Processing units or "Dump Stations"
  - i. Wear mandatory personnel protective equipment (PPE) when using the soiled bedding processing station including N95 mask or Powered Air Purifying Respirators (PAPR), double nitrile gloves, eye protection, double surgical gowns, head cover and shoe covers.
  - ii. Prepare the soiled bedding processing station for operation
  - iii. Turn the power and light switch on and let run for at least 10 minutes.
  - iv. Open doors below work surface.
  - v. Prepare a medical waste box
  - vi. Fold flattened box and tape the bottom closed using wide shipping tape along the seam and the side edges.
  - vii. Label the box with the following information:
    - 1. Room number,
    - 2. "WB" (standing for wet bedding).

SOP TITLE: Decontamination of Biological and Chemical hazard materials in Animal Caging

SOP No:DATE OF ORIGIN:DATE OF REVISION:EFFECTIVE DATE OF THIS2.35/21/044/9/18 (5)SOP: 04/16/2018REFERENCES: SOP 1.2 Dress Within RPCIC Animal Facility; SOP 5.17 Operation ofMedical Research Complex (MRC) autoclaves: large autoclave; 1st floor (LST 1), smallautoclave; 1st floor (LST 2), small autoclave; 4th floor (LST 3); SOP 5.18 Cancer Cell Center(CCC) Autoclave OperationDISTRIBUTION: LASR Facility Director/Attending Veterinarian; LASR Administor ; LASR

Operations Manager; LASR Clinical Veterinarian; LASR Supervisory Staff; LASR Staff

5	Remove PI information and create a new SOP in Section 12 where the	4/9/2018
	Scope is directed at PI's	

### LABORATORY ANIMAL RESOURCES (LAR) SOP / Policy Distribution Receipt Form

SOP TITLE:Decontamination of Biological and Chemical hazard materials in Animal CagingSOP No:DATE OF ORIGIN:DATE OF REVISION:EFFECTIVE DATE OF THIS SOP:2.35/21/044/9/18 (5)04/16/2018REFERENCES: SOP 1.2 Dress Within RPCIC Animal Facility; SOP 5.17 Operation of MedicalResearch Complex (MRC) autoclaves: large autoclave; 1st floor (LST 1), small autoclave; 1st floor (LST 2), small autoclave; 4th floor (LST 3); SOP 5.18 Cancer Cell Center (CCC) Autoclave OperationDISTRIBUTION: LASR Facility Director/Attending Veterinarian; LASR Administor ; LASR OperationsManager; LASR Clinical Veterinarian; LASR Supervisory Staff; LASR Staff

I have received training on the above SOP and am aware that I am responsible for reading, understanding and following the procedure.

Name (printed)	Signature	Date
		-
	·	
		· · · · ·

SOP TITLE: Decontamination of Biological and Chemical hazard materials in Animal Caging

SOP No:DATE OF ORIGIN:DATE OF REVISION:EFFECTIVE DATE OF THIS2.35/21/044/9/18 (5)SOP: 04/16/2018REFERENCES: SOP 1.2 Dress Within RPCIC Animal Facility; SOP 5.17 Operation ofMedical Research Complex (MRC) autoclaves: large autoclave; 1st floor (LST 1), smallautoclave; 1st floor (LST 2), small autoclave; 4th floor (LST 3); SOP 5.18 Cancer Cell Center(CCC) Autoclave OperationDISTINUE LASE Excilite Director/Attendies Vetering

**DISTRIBUTION:** LASR Facility Director/Attending Veterinarian; LASR Administor; LASR Operations Manager; LASR Clinical Veterinarian; LASR Supervisory Staff; LASR Staff

3. Date

- viii. Add one red (medical waste) bag in the box so that the bag is over the box opening to hold the flaps open.
  - ix. Place the prepared medical waste box below funnel and close doors below the work surface.
  - Remove the filter top from the cage and spray the inside with the appropriate neutralizing solution (such as 10% bleach solution or 1 N NaOH) before dumping the bedding and scraping the cage clean.
- xi. Dispose of the bedding, food and gauze (or prepared bleach wipes) used to swab out the cages in the appropriate medical waste box.
- xii. Re-assemble cages at the work station and place on the appropriate cage/equipment rack to be transported to cage processing.
- xiii. Tie the red bag inside the medical waste box when the bag is full (not to exceed 40 pounds) and tape shut the box.
- xiv. Clean and disinfect the unit with bleach and spray with 70% Alcohol to remove excess bleach and avoid corrosion.
- xv. Turn off the unit
- xvi. Label box as indicated and take to MRC dock area for pickup by RPCI Housekeeping staff.

### 8. FORMS AND APPENDICES:

- a. SOP DISTRIBUTION RECEIPT FORM
- b. Bleach or NaOH labels
- c. Rack sign for Autoclave
- d. Rack sign for Chemical Decon

### 9. DOCUMENT REVISION HISTORY:

<b>Revision Number</b>	Description of Changes	Date of Revision
3	Combined Bio and Chemical	3/14/2014
	Hazards into one SOP.	
	Updated procedures for labeling and	
	processing the cages in consultation	
	with OES	
4	Format revision, removed QA and	2/5/18
	annual review sections	

Page 3 of 4 Obtained by Rise for Animals. Uploaded to Animal Research Laboratory Overview (ARLO) on 06/29/2021

# MATERIALS on this RACK MUST <u>FIRST</u> BE CHEMICALLY DECONTAMINATED.

# <u>FOR CONTAINMENT REASONS</u> <u>BOTTLES MUST REMAIN IN THE</u> <u>CAGES.</u>

# MATERIALS on this RACK MUST <u>FIRST</u> BE CHEMICALLY DECONTAMINATED.

# <u>FOR CONTAINMENT REASONS</u> <u>BOTTLES MUST REMAIN IN THE</u> <u>CAGES.</u>

# MATERIALS on this RACK MUST be DECONTAMINATED by AUTOCLAVING.

### FOR CONTAINMENT REASONS BOTTLES MUST REMAIN IN THE CAGES.

## DO NOT DUMP CAGES UNLESS THE AUTOCLAVE TAPE HAS CHANGED.

# MATERIALS on this RACK MUST be DECONTAMINATED by AUTOCLAVING.

## FOR CONTAINMENT REASONS BOTTLES MUST REMAIN IN THE CAGES.

## **DO NOT DUMP CAGES UNLESS THE AUTOCLAVE TAPE HAS CHANGED.**

SOP TITLE: Packaging of Medical Waste – Animal Carcasses for Disposal			
SOP No:	DATE OF ORIGIN:	DATE OF REVISION:	
2.5	3/1/2005	4/24/2013 (1)	<b>THIS SOP:</b> 10.28.13
		ccupational Environmental S	
SOP 2.1 Dr	ess within RPCI Animal	Facility, SOP3.23 Provision	of Animal Carcasses to Not-
for-Profit A	gencies		
DISTRIBU	<b>TION:</b> LAR Facility Dir	rector; LAR Administrator;	LAR Facility Manager; LAR
Institute Ve	terinarian; LAR Supervis	ory Staff; LAR Staff; GLP	Fest Facility Management;
GLP Study	Director; GLP Quality A	ssurance	
<u>TIT</u> LAI <b>2. AP</b>	ROVAL: Sandra Buitra	SIGNATUR Jaho Hand ago, DVM, DACLAM	10/4/13
	L <u>E</u> R Facility Director VIEW:	SIGNATUR 	
TIT	LE	SIGNATUR	DATE

Quality Assurance

### 4. ANNUAL REVIEW:

Test Facility Management	Date	Quality Assurance Unit	Date
			-
	· ·		

- 5. **PURPOSE:** To outline the proper procedure for routine packaging of animal carcasses as medical waste.
- 6. SCOPE: This SOP applies to all personnel charged with the disposition of animal carcasses collected from designated areas in LAR at Roswell Park Cancer Institute.

#### SOP TITLE: Packaging of Medical Waste – Animal Carcasses for Disposal

SOP No:	DATE OF ORIGIN:		EFFECTIVE DATE OF
2.5	3/1/2005	4/24/2013 (1)	THIS SOP: 10.28.13

**REFERENCES:** Consultation w/Occupational Environmental Safety (OES) staff SOP 2.1 Dress within RPCI Animal Facility, SOP3.23 Provision of Animal Carcasses to Notfor-Profit Agencies

**DISTRIBUTION:** LAR Facility Director; LAR Administrator; LAR Facility Manager; LAR Institute Veterinarian; LAR Supervisory Staff; LAR Staff; GLP Test Facility Management; GLP Study Director; GLP Quality Assurance

### 7. MATERIALS AND EQUIPMENT:

- a. Personal Protective Equipment (PPE)
  - i. See SOP 2.1
  - ii. Gloves –

b. Bio-Hazardous Packaging Materials – all supplies can be found stored in MRC Dock #2 accessible on the 1<sup>st</sup> floor MRC within the vivarium.

- i. Infectious Waste Box(es)
- ii. Red Bio-Hazardous Waste Bags 2 bags per infectious waste box
- iii. Packaging Tape & Dispenser
- iv. Large, heavy gauge garbage bag
- v. Black Permanent Marker
- vi. Rolling flatbed truck

### 8. DEFINITIONS: N/A

#### 9. PROCEDURE:

- a. Pre-assemble several infectious waste boxes.
  - i. Unfold flattened boxes and press into square shape
  - ii. Fold down the end flaps of the bottom of the box.
  - iii. Tape bottom of boxes shut. Place 2 strips of tape over main seam as well as 1 strip of tape along each outside edge.
  - iv. Open two red Bio-hazardous bags. Place one bag inside the infectious waste box spreading the bag over the rim and edges of the open top of the box. Place the second bag inside of the first, spreading the second bag over the rim and edges of the open top of the box.

b. Using the rolling flatbed truck dedicated for bio-hazardous waste, travel to each LAR designated and approved carcass disposal locations within the LAR Vivarium located in the MRC as well as the hallway between the MRC and CCC buildings. These locations include and should be traveled in this order:

- i. 4<sup>th</sup> Floor Vivarium lobby refrigerator/freezer located near pillar
  - 1. Do not take bags marked for wildlife food supplement. Refer to SOP3.23 for more information on handling these carcasses.
  - ii. 3<sup>rd</sup> Floor Vivarium lobby refrigerator/freezer and second large freezer located near pillar

Page 2 of 3

### SOP TITLE: Packaging of Medical Waste – Animal Carcasses for Disposal

SOP No:	DATE OF ORIGIN:	<b>DATE OF REVISION:</b>	EFFECTIVE DATE OF
2.5	3/1/2005	4/24/2013 (1)	THIS SOP: 10.28-13
REFEREN	CES: Consultation w/Oc	cupational Environmental	Safety (OES) staff
SOP 2.1 Dre	ess within RPCI Animal I	Facility, SOP3.23 Provision	of Animal Carcasses to Not-
for-Profit A		•	
DISTRIBU	TION: LAR Facility Dir	ector; LAR Administrator;	LAR Facility Manager; LAR
Institute Vet	erinarian; LAR Supervise	ory Staff; LAR Staff; GLP	Test Facility Management;
GLP Study	Director; GLP Quality As	surance	-

- iii. 2<sup>nd</sup> Floor Vivarium Cold Room (M295) Can be accessed through the necropsy room (M288) or directly via door near elevators.
- iv. MRC/CCC Connector Hallway large upright freezer in middle of hallway
  - 2. DO NOT OPEN NEARBY LOCKED CHEST FREEZER as it is dedicated to carcasses and materials contaminated with radiation and are handled by Radiation Safety Dept. staff.
- c. At each location, don nitrile gloves and remove appropriate carcasses from the above locations and place into the double-bagged, pre-made bio-hazard boxes.

d. At the final location, MRC/CCC connector hallway, before sealing the biohazardous boxes, weigh boxes as necessary using the large scale next to the large upright freezer.

- i. <u>Boxes should not weigh more than 40lbs</u>. If needed, redistribute carcasses among boxes to avoid overweighing.
- e. Securely tie each of the two red bags separately for each bio-hazard box used.
- f. Seal the top of the bio-hazardous boxes using packaging tape. Place 2 strips of tape over main seam as well as 1 strip of tape along each outside edge.
- g. Label each bio-hazard box as follows:
  - i. LAR
  - ii. Write "Carcasses"
  - iii. Date of packaging
- h. Place boxes in the MRC/CCC connector hallway for housekeeping pickup on Wednesday mornings.

### **10. FORMS AND APPENDICES:**

a. SOP DISTRIBUTION RECEIPT FORM

### 11. DOCUMENT REVISION HISTORY: Type in information related to SOP title.

Revision Number	Description of Changes	Date of Revision
1	Minor	

Page 3 of 3

# **Department of Laboratory Animal Resources**

f and Nama		T:41.0	Education Level	
Last Name	First Name	Title	(highest)	AALASCert
Aronica	Heather	Lab Animal Services Attendant		
Bazinet	Derek	LAR Area supervisor	AAS	LATg
Bazinet	Venessa	LAR Area supervisor	AAS	RALAT
Cartwright	Nichole	Lab Animal Services Attendant		
Constantino	JoAnne	LAR Area supervisor	BBA	LATg
Crisp	Robert	Lab Animal Services Attendant		
Curtin	Leslie	Attending Veterinarian	DVM, DACLAM	
Doll	Jodi	Lab Animal Services Attendant		
Ertel	Edward	Lab Animal Services Attendant		
Farrauto	Melanie	Animal Healthcare Technologist	AAS	LATg
Gailey	Jane	Lab Animal Services Attendant		· · · · · · · · · · · · · · · · · · ·
Hartley	Justin	Lab Animal Resources Manager	BS	LATg
Higgins	Teresa	Sr. Accounts Clerk	AAS	
Hill	Ernest	Lab Animal Services Attendant		
Kent	Edward	Lab Animal Services Attendant		
Kocienski	Anna	LAR Area supervisor		
Kucharski	Casimir	Sr. Lab Animal Services Attendant		ALAT
Lepovich	Bradley	Sr. Lab Animal Services Attendant		
London-Clemons	David	Lab Animal Services Attendant		
Martemianov	Dmytro	Sr. Lab Animal Services Attendant		
McCabe	Philip	Lab Animal Services Attendant		
McCabe	Timothy	Sr. Lab Animal Services Attendant		
Murphy	Betty	Lab Animal Services Attendant		
Murphy	Sean	Lab Animal Services Attendant		· · · · · · · · · · · · · · · · · · ·
Naish	Jeffery	Lab Animal Services Attendant		
Rouse	Jon	Lab Animal Services Attendant		
Rucker	Gregory	Lab Animal Services Attendant		
Santucci	Christina	Lab Animal Services Attendant		
Scott	Caesar	Lab Animal Services Attendant		
Sexton	Sandra	Facility Dir. LAR, Institute Veterinarian	DVM, DACLAM	LATg
Siminski	Wendie	Sr. Lab Animal Services Attendant	AAS	ALAT
Spierto	Carol	Operations Manager	MBA	LATg, CMAR
Stewart	Amy	Animal Healthcare Technologist	AAS	LATg
Szczudlik	Gary	Sr. Lab Animal Services Attendant		ALAT
Tabb	Donald	Lab Animal Services Attendant		
Vence	Stephany	Lab Animal Services Attendant		
Watts-Langhan	Ashton	Sr. Lab Animal Services Attendant		LATg
Westfield	John	LAR Equipment Manager		
Wilkins	Robyn	Administrative Aide	AAS	LATg
Williams	Bradley	Lab Animal Services Attendant		
Wittmeyer	James	Lab Animal Services Attendant		ALAT
Wroblewski	Christopher	Lab Animal Services Attendant	******	ALAT
Yocum	Heidi	Lab Animal Services Attendant		
Young	Raymond	Animal Healthcare Technologist	MS, LVT	LATg
Zak	Melinda	Lab Animal Services Associate		ALAT

(All staff have HS/GED)