

Name: SUNY College at Old Westbury [A061]

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Recd

Code A061

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: SUNY College at Old Westbury	
Address 1: 223 Store Hill Rd., Box 210	
Address 2:	
City, State, Zipcode: Old Westbury, NY 11568	
County: Nassau	
Telephone Number: 516-876-3160	
Fax Number: 516-876-3347	
E-mail Address: buttsc@oldwestbury.edu	

RECEIVED

NOV 2 2018

FACILITIES MANAGEMENT

SECTION I - GENERAL LABORATORY/INSTITUTION INFORMATION

Ownership:

- ☐ Corporation ☒ Government ☐ Individual ☐ Not For Profit ☐ Partnership
☐ Other: _____

Facility Type:

- ☐ 2 Year College ☒ 4 Year College ☐ Clinical or Environmental Lab
☐ Hospital ☐ Medical School ☐ Product Testing Lab
☐ Public Health Lab ☐ Research & Development Lab ☐ Veterinary School
☐ Other: _____

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FACILITIES MANAGEMENT

SECTION II - PROGRAM INFORMATION

Animals (Check all that apply):

- | | | | |
|--|--------------------------------------|---|--------------------------------------|
| <input checked="" type="checkbox"/> Mice (genus mus) | <input type="checkbox"/> Hamsters | <input type="checkbox"/> Fish | <input type="checkbox"/> Sheep/Goats |
| <input type="checkbox"/> Mice (wild or other) | <input type="checkbox"/> Guinea Pigs | <input type="checkbox"/> Cats | <input type="checkbox"/> Cattle |
| <input checked="" type="checkbox"/> Rats (genus rattus) | <input type="checkbox"/> Rabbits | <input type="checkbox"/> Dogs | <input type="checkbox"/> Swine |
| <input type="checkbox"/> Rats (wild or other) | <input type="checkbox"/> Small Birds | <input type="checkbox"/> Non-Human Primates | <input type="checkbox"/> Poultry |
| <input checked="" type="checkbox"/> Other: <u>Frogs / Snakes</u> | | | |

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)? ☐ Yes ☒ No
(If Yes, please explain)

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):

- | | |
|---|---|
| <input type="checkbox"/> Diagnostic Procedures | <input checked="" type="checkbox"/> Education/Teaching Demonstrations |
| <input checked="" type="checkbox"/> Experimentation | <input type="checkbox"/> Farm Production |
| <input checked="" type="checkbox"/> Public Display | <input type="checkbox"/> Public Health/Disease Surveillance |
| <input type="checkbox"/> Other: _____ | |

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:

- | | | |
|--|--|--|
| <input type="checkbox"/> AAALAC Accredited | <input type="checkbox"/> USDA Registered | <input checked="" type="checkbox"/> None |
| <input type="checkbox"/> Other: _____ | | |

SECTION III - PERSONNEL INFORMATION

CURRENT DATA	INDICATE CHANGES HERE
Laboratory/Institution Person In Charge (Name): Butts III, Calvin O.	
Title: President	
Telephone Number: 516-876-3160	
Work Hours: to to to to to to to	Work Hours: Mon: to Tue: to Wed: to Thu: to Fri: to Sat: to Sun: to

CURRENT DATA	INDICATE CHANGES HERE
Veterinarian in Charge (Name): Zimmerman, Thomas	
Title: Asst Prof Dir, Div of Lab Animal Resources	
Telephone Number: 631-444-6978	
Work Name/Address (if different from laboratory/institution): Stony Brook University Health Sciences Ctr. BST Level 1 Rm 223 SUNY at Stony Brook Stony Brook, NY 11794-8611	
Work Hours: to to to to to to to	Work Hours: Mon: to Tue: to Wed: to Thu: to Fri: to Sat: to Sun: to

SECTION III - PERSONNEL INFORMATION

CURRENT DATA	INDICATE CHANGES HERE
Contact Person (Name): Johnson, Judith	
Title: Laboratory Manager, Chair IAGUC	
Telephone Number: 516-876-2721	
Work Hours: MON: 9:00 am to 5:00 pm TUE: 9:00 am to 5:00 pm WED: 9:00 am to 5:00 pm THU: 9:00 am to 5:00 pm FRI: 9:00 am to 5:00 pm to to	Work Hours: Mon: to Tue: to Wed: to Thu: to Fri: to Sat: 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).

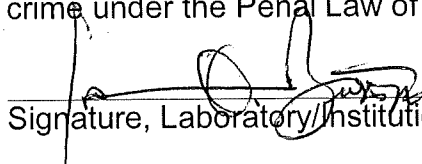
☐ No additional staff.

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.


Signature, Laboratory/Institutional Officer

President

Title

10/30/18

Date

SECTION V - ADDITIONAL SITES WHERE LIVING ANIMALS ARE LOCATED

CURRENT DATA	INDICATE CHANGES HERE
Site [003] Name: Biological Sciences	
Address 1: Natural Science Bldg., S121 A-D & S127	
Address 2:	
City, State, Zipcode: Old Westbury, NY 11568	
Site Telephone Number: 516-876-2721	
Site Fax Number:	
Site E-mail Address:	
Contact Person (Name): Johnson, Judith	

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):	

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):	



PSYCHOLOGY

Animal Care Staff

William Gillis, FT Assistant Professor, Ph.D.

Manya Mascareno, FT Associate Professor, Ph.D.

Lorenz Neuwirth, FT Assistant Professor, Ph.D.

Christopher Olsen, FT Laboratory Technician, M.S.

PSYCHOLOGY

Institutional Animal Care and Use Committee (IACUC) Members

Name & Degree	Member Composition	Department	Expertise
Lillian Park, Ph.D.	Chair	Psychology	Learning and Memory, Behavioral Testing, Cognitive Neuroscience
Judith Johnson, M.S.	Affiliated Lab Manager	Biology/Chemistry	Biology/Chemistry
Thomas Zimmerman, DVM	Non-Affiliated Veterinarian	(External) Pathology Stony Brook University	Veterinary Medicine & Animal Welfare
Jayashree Thiruverkadu, B.A.	Affiliated Non-Scientist	Chemistry & Physics	Non-Scientist Impartial Reviewer Sociology & Economics
Harry W. Faustmann	Non-Affiliated	Nassau County Aquarium Society - President	Non-scientist Impartial Reviewer
Christopher Olsen, M.S.	Affiliated Scientist	Chemistry & Physics	Chemistry & Physics
Manya Mascareno, Ph.D.	Affiliated Scientist	Biology	Cancer Molecular and Cell Biology
William Gillis, Ph.D.	Affiliated Scientist	Biology	Amphibian Development and Molecular Biology
Lorenz Neuwirth, Ph.D.	Affiliated Scientist	Psychology	Neuroscience, Neurosurgery, Animal survival and Non-survival Surgeries, Animal Cognitive and Behavioral Testing