



OFFICE OF RESEARCH

Office of Animal Care Compliance

September 19, 2019



Executive Vice Chancellor,
Vice Chancellor for Research

RE: Fall 2019 [REDACTED] Semi-Annual Animal Care and Use Program Review, PI Laboratory and Animal Resource Facility Inspections

Mandated by the US Public Health Service, Office of Laboratory Animal Welfare (OLAW) and the Animal Welfare Act and Animal Welfare Regulations (AWA and AWAR), the semi-annual inspections of the [REDACTED] Animal Resource Facilities (ARFs) and PI laboratories were conducted on Wednesday, August 28, 2019. The [REDACTED] Institutional Animal Care and Use Committee (IACUC) inspectors included:

[REDACTED] (IACUC Chair), [REDACTED] (Community Member), [REDACTED] (Attending Veterinarian), [REDACTED] and [REDACTED]. The inspectors were escorted in [REDACTED] by the [REDACTED] ARF Supervisor, [REDACTED] and by the [REDACTED] ARF Animal Technician, [REDACTED]. In [REDACTED] the inspectors were escorted by the [REDACTED] ARF Supervisor, [REDACTED]. The Office of Animal Care Compliance (OACC) Sr. Operations Manager, [REDACTED] and the OACC Compliance Specialist, [REDACTED] were included on the inspection team. Both the [REDACTED] and [REDACTED] ARFs were impeccably maintained and virtually free from deficiencies other than some infrastructure issues. The supervisors and technicians in both facilities should be highly commended for their outstanding efforts.

The semi-annual program review was completed at the convened [REDACTED] IACUC meeting on September 19, 2019. This program continues to adhere to provisions of the Guide for the Care and Use of Laboratory Animals, Eighth Edition, the Public Health Service Policy on Humane Care and Use of Laboratory Animals, IV.B. 1-8, and the Animal Welfare Act and Regulations, title 9, chapter 1, subchapter A.

The Committee re-evaluated compliance of the facility infrastructure during this semi-annual inspection. The University committed funding for a new Zebrafish facility project. The construction design was completed by UNM Planning, Design, & Construction (PDC) and the award to a contractor is underway with expected completion within 6-8 months. Upgrade of the [REDACTED] cage washroom and washer equipment is the last major renovation required to achieve mid-term compliance, research support, and the potential for AAALAC accreditation.





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In addition, the [REDACTED] infrastructure has greatly improved over the years with only two remaining midterm equipment replacements and a short term requirement for repair of a bottle washer that are necessary to optimize animal care, occupational safety, and compliance. The mid-term equipment replacements include an autoclave needed for sterilization of animal cages associated with some research and an aged cage/rack washer unit, which could fail within the next few years. The short-term repair of the bottle washer unit is required because the counter balances that hold the vertical sliding doors open (clean and dirty side) have failed. When placing or removing water bottle racks from the washer compartment, the individual doors are opened and then propped with a mop stick. These doors are quite heavy and have sharp edges. Accidental dislodgment of the prop stick while staff are placing or removing water bottle racks would pose serious occupational risks. The unit is very old and standard parts are no longer available. SRS conducted a risk assessment and concurred that new balances and an additional safety mechanism are necessary. The first counter balances that were installed failed after a few weeks. Higher capacity balances are on order and a contractor is being scheduled to also install safety latches as a secondary safeguard.

The committee will continue to work with the Animal Research Advisory Committee (ARAC) and the Office of Research and Economic Development (ORED) to develop time lines and action plans necessary to sustain compliance and achieve the long-term goal of AAALAC International accreditation. Major impediments to accreditation continue to be upgrade of cage wash facilities and addition or upgrade of required functional space in [REDACTED]

A detailed summary of inspection findings is attached. We classify the findings as A = acceptable, M = minor deficiencies, S = significant deficiencies (are or may be a threat to animal health or safety), C = Change in program, and N/A = not applicable.

There were no dissenting or minority views at this time.

Sincerely,

[REDACTED]

[REDACTED] IACUC Chair

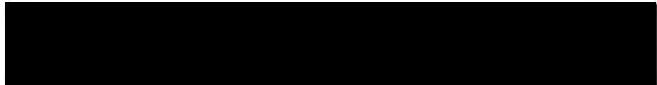
[REDACTED]



Office of Animal Care Compliance



[Redacted]
[Redacted] Attending Veterinarian



Date 9/19/19





Office of Animal Care Compliance

The Institutional Animal Care and Use Committee have approved an exception to the standards and regulations of the Animal Welfare Regulations, reference: 3.28 (b) (3) (ii).

Summary:

A hamster breeding colony with a proven breeding record going back more than 20 years has been approved to continually maintain pair or trio breeders (1 M: 1-2F) from the time of weaning until retired from breeding. The cage floor space provided is 221 square inches, and includes ample nesting material along with standard rodent bedding. The success of the colony has prompted this exception and it affects an average of 4 hamster breeder cages and associated litters.

Investigator Explanation:

The method of establishing mating pairs or trios at the time of weaning has been utilized for years and determined by the Attending Veterinarian and Facility Supervisor to result in much less adult and neonatal injury or death than intermittently pairing of adult breeders. Although the USDA animal welfare regulations (ref: 3.28 (b)(3)(ii)) states that a female hamster with litter should be housed with no other hamsters, our current housing method meets the intent of the regulation, which is to optimize enrichment while limiting aggression between breeders and minimizing cannibalism of neonates. Although there are references in the literature that cannibalism may increase when nursing hamsters are housed with other adult hamsters, based upon the procedures and experience in the [REDACTED] ARF, with stable life-long mating groups, "life-mates", we rarely have seen incident of cannibalism under this paradigm and early pairing enhances establishment of breeders that are compatible. If significant fighting between adults or cannibalism of young should occur, then the respective group will be separated and not used as breeders, unless there are other extenuating circumstances that may have contributed to such adverse outcomes.

Semi-annual IACUC Review – September 19, 2019

Semi-annual Inspection of Animal Resource Facilities (ARFs) and PI Laboratories
Main Campus – August 28, 2019



[REDACTED] ARF						
Inspectors	Deficiencies A, M, S, C, N/A	Location and Lab Function	Deficiency and Plan for Correction and Action (if any)	Responsible Party	Correction Schedule	Date Completed
[REDACTED]	N/A	[REDACTED]	This room will undergo future construction to become a zebrafish facility. No animals are currently being housed in this room.	[REDACTED]	N/A	#1 - Noted since 2013 and significant since 2015.
	M		Neat and clean overall. 1) Pest trap was full of insects. Replace pest traps on a regular basis and document the frequency.		Correct by September 27, 2019.	Corrected on 9/10/19.
	A		Neat and clean. No deficiencies noted.		N/A	N/A
	M		Neat and clean. 1) An expired bottle of Viron should be removed. 2) The sharps container was full to the line. Replace with an empty sharps container. 3) It was very hard to read the weights on the gas scavenging canisters because there were so many of them. Good job weighing the canisters! Maybe the canister weights could be recorded on a		Correct by September 27, 2019.	Corrected on 9/13/19.

			sheet of paper if there are a lot of them so it would be easier to read and thus determine if the canister is over the allotted weight limit.			
	M		Neat and clean. 1) Pest trap was full of insects. Replace pest traps on a regular basis and document the frequency.		Correct by September 27, 2019.	Corrected on 9/13/19.
	M		Neat and clean. 1) Pest trap was full of insects. Replace pest traps on a regular basis and document the frequency.		Correct by September 27, 2019.	Corrected on 9/13/19.
	A		Neat and clean. No deficiencies noted.		N/A	N/A
	A		Very neat and clean. No deficiencies noted.		N/A	N/A
	S/M		1) The cage wash is a single room with dirty and clean wash processes within the same space. This format increases risks of cross contamination from dirty to clean cages (Ref. NCR 8 th Edition "Guide" page 143 Facilities for sanitizing materials). In addition, the small cage/bottle washer unit lacks required capacity and is antiquated. The washer is 20 years old and many components required for maintenance/repair are no longer routinely manufactured. The unit currently requires repair but can be used if continuously monitored by staff		Correct #1 as soon as funds become available. Correct #2 by September 27, 2019.	Noted and significant since Fall of 2018. #2 corrected on 9/13/19.

			<p>during cycles. Intermittently the spray rack locks up and if personnel don't immediately stop the cycle further damage to cables and/or clutch drives will occur. If the unit fails, the facility will be required to transport of cages to other washers on campus. Currently there are no [REDACTED] resources available for containing and safely transporting large numbers of soiled and clean cages/equipment. In addition, large numbers of cages from this facility require sterilization by the ARF for housing of immune deficient mouse models. Exposure of these immune deficient rodents to common environmental microbial agents would compromise research and could result in fatal infections. Sterilization of these cages requires the ARF staff to transfer cages/equipment to the upper floors of [REDACTED]. Transporting cages outside of ARF can result in cross contamination between environment and sterile cages; also scheduling use of the other autoclaves is limited and only clean cages can be autoclaved in these units. The departmental autoclaves are located in student and public areas. Therefore, sterilization of soiled or biohazardous cages in these units is unacceptable due to risks of release of infectious agents into public areas, not to mention release of noxious odors.</p> <p>2) Pest trap was old and full of dust so not sticky anymore. Replace pest traps on</p>			
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			a regular basis and document the frequency.			
	A		Neat and clean. No deficiencies noted. No animals are currently being housed in this room.		N/A	N/A
	A		Neat and clean. No deficiencies noted.		N/A	N/A
	A		Very neat and clean. No deficiencies noted.		N/A	N/A
	A		Neat and clean. 1) Some materials were marked "Bed and Nest sterilized 5/2018". Those items should be re-sterilized.		Correct by September 27, 2019.	Corrected on 9/13/19.
	A/C		Neat and clean. No deficiencies noted.		N/A	N/A
	C		Neat and Clean. No deficiencies noted. No animals are currently being housed here. There may be a need to house animals in this space in the next six months due to construction. If animals will be housed here, then this room needs a pest strip, the drain		N/A	N/A

			should be flushed, and the floor should be mopped first.			
			PI Animal Use Laboratories			
	M		Neat and clean. 1) One of the small carboys needed something below it to catch potential drips/spills. 2) The windowsill in the room was full of dead insects and spider webs. This should be cleaned up.		#1 was corrected immediately. Correct #2 by September 27, 2019.	#2 corrected on 9/10/19.
			ARF			
	M		Neat and clean. 1) There were some recapped needles in the sharps container despite signage to the contrary. Personnel should be retrained. 2) There was no pest trap found in room [REDACTED]. A pest trap should be placed in this room and regularly monitored.		Correct by September 27, 2019.	Corrected 8/29/2019
	M		Neat and clean. 1) Pest trap was old and full of dust so not sticky anymore. Replace pest traps on a regular basis and document the frequency.		Correct by September 27, 2019.	Corrected 8/29/2019
	S/M		Neat and clean. 1) The counter balance system that holds the vertical sliding bottle washer doors open (clean and dirty side) have failed. New counter balances were placed but failed after placement so new higher capacity balances are being procured. Currently a mop stick is used to prop each of the doors during access to the washer compartment. These doors are quite heavy and have sharp edges. Dislodging of the prop stick during		Correct #1 as soon as parts arrive. Correct #2 by September 27, 2019.	#1 Corrected on 9/24/19. #2 Corrected 9/6/2019

			<p>placement or removal of water bottle racks would pose serious occupational risks. The unit is very old and standard parts are no longer available. SRS conducted a risk assessment and concurred that new balances and an additional safety mechanism are necessary. The replacement part is on order and a contractor is being scheduled to also install safety latches as a secondary safeguard.</p> <p>2) The eye wash inspections had not been documented within the last 30 days. Eye washes should be inspected monthly and the inspector's initials should be recorded on the inspection card attached to the eye wash. This problem was reported in this building during the last set of inspections. UNM [REDACTED] Facility Management is responsible for routine eyewash flushing and maintenance but they only test quarterly.</p>			
[REDACTED]	A	[REDACTED]	Neat and clean. No deficiencies noted.	[REDACTED]	N/A	N/A
	A		Neat and clean. No deficiencies noted.		N/A	N/A
	A		Neat and clean. No deficiencies noted.		N/A	N/A

	A		Neat and clean. No deficiencies noted.		N/A	N/A
	M		<p>Neat and clean.</p> <ol style="list-style-type: none"> 1) The eye wash inspections had not been documented within the last 30 days. Eye washes should be inspected monthly and the inspector's initials should be recorded on the inspection card attached to the eye wash. This problem was reported in this building during the last set of inspections. UNM [REDACTED] Facility Management is responsible for routine eyewash flushing and maintenance but they only test quarterly. 2) Surgical scrub faucets squirt water on the user. These should be repaired. 		Correct by September 27, 2019.	#1 Corrected 9/6/2019. #2 Work order placed 9/18/19.
	A		Neat and clean. No deficiencies noted.		N/A	N/A
			[REDACTED] PI Animal Use Laboratories			
	M		<p>Neat and clean.</p> <ol style="list-style-type: none"> 1) The drawer lock on the drawer where drugs are stored does not keep the drawer from opening. It should be repaired. 2) The eye wash inspections had not been documented within the last 30 days. Eye washes should be inspected monthly and the inspector's initials should be recorded on the inspection 		Correct #1 as soon as feasible.	#2 Corrected 9/6/2019

			card attached to the eye wash. This problem was reported in this building during the last set of inspections. UNM [REDACTED] Facility Management is responsible for routine eyewash flushing and maintenance but they only test quarterly.			
[REDACTED]	A	[REDACTED]	Neat and clean. No deficiencies noted.	[REDACTED]	N/A	N/A
[REDACTED]	M	[REDACTED]	Neat and clean. 1) There was no emergency contact signage on the door. This should be added. 2) The floor was dirty and should be cleaned. 3) Table and shelving surfaces in the room were dusty and should be cleaned.	[REDACTED]	Correct by September 27, 2019.	Corrected 9/25/2019.
[REDACTED]	M	[REDACTED]	Very neat and clean. 1) The fume hood had not been certified in the last year. Do not use the fume hood for animal procedures until it is certified. 2) The handle on one of the fridges is broken and should be repaired. 3) The guillotine has a loose hinge so does not close with force. This should be repaired prior to use.	[REDACTED]	Correct #2 by September 27, 2019.	Corrected 9/6/2019.
[REDACTED]	M	[REDACTED]	No animals are handled or housed here. Drug storage only. 1) One bottle of expired Fatal Plus should be returned to the ARF.	[REDACTED]	Correct by September 27, 2019.	Corrected 9/25/2019.
[REDACTED]	A	[REDACTED]	Neat and clean. No deficiencies noted.	[REDACTED]	N/A	N/A

	A		Neat and clean. No deficiencies noted.		N/A	N/A

A= acceptable, M = minor deficiencies, S = significant deficiencies (are or may be a threat to animal health or safety), and C= change in program, N/A=not applicable.

Semiannual Program Review and Facility Inspection Checklist

About the checklist

The Semiannual Program Review and Facility Inspection Checklist is provided to assist institutions in conducting their semiannual reviews of programs and facilities for the care and use of animals. The Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals ([Policy](#)), section [IV.B.1.-2.](#), requires the Institutional Animal Care and Use Committee (IACUC) to review the institution's program for humane care and use of animals and inspect all of the institution's animal facilities at least once every 6 months using the *Guide for the Care and Use of Laboratory Animals: Eighth Edition* ([Guide](#)) as a basis for evaluation.

How to use the checklist

This checklist is a tool to assist IACUCs in conducting thorough semiannual reviews. IACUCs are not required to use this checklist but are encouraged to amend it as necessary to reflect institutional programs and needs, or to develop their own checklist. If the checklist is modified, periodic review of the checklist is recommended to ensure relevant topics are considered as the animal care and use program changes.

The checklist covers the major topics of the *Guide* and the requirements of the PHS Policy. The checklist does not replace the *Guide*, but should be utilized in conjunction with the *Guide*. The *Guide* provides the standards, recommendations, and descriptions of desired outcomes necessary to evaluate and inspect an animal care and use program. Relevant references for the *Guide* and the PHS Policy are noted. Endnotes are included to reference specific U.S. Department of Agriculture (USDA) regulatory requirements that differ from the PHS Policy. Topics that are new to this version of the checklist or identified as a "must" in the *Guide* are highlighted. A column to identify changes that have occurred in the institution's program for animal care and use (PHS Policy [IV.A.1.a.-l.](#)) since the last review is also a new feature.

The checklist consists of the following sections:

- I. Semiannual Program Review Checklist
 - Institutional Policies and Responsibilities
 - Veterinary Care
- II. Semiannual Facility Inspection Checklist
 - Terrestrial Animal Housing and Support Areas
 - Aquatic Animal Housing and Support Areas
 - Cagewash
 - Special Facilities: Aseptic Surgery
 - Special Facilities: Procedure Areas, Non-survival Surgeries, Laboratories, Rodent Surgeries, Imaging, Whole Body Irradiation, Hazardous Agent Containment, Behavioral Studies
- III. Semiannual Program Review and Facility Inspection Report
- IV. Endnotes

It is recommended that the Program Review section be completed during an IACUC meeting. Because physical aspects of a program require visual observation to evaluate, it is recommended that the Facility Inspection section be completed during an inspection of the facilities, including satellite facilities.

A table is provided, "Semiannual Program Review and Facility Inspection Report," as a format for the IACUC to organize and track information regarding deficiencies, and plans and schedules for correction. IACUCs may choose to attach the table to the Semiannual Report to the Institutional Official.

Questions or comments?

Suggestions or comments about this checklist should be e-mailed to: olawdpe@mail.nih.gov.

I. Semiannual Program Review Checklist ⁱ

Institutional Policies and Responsibilities

Date: 9-19-2019

1. Animal Care and Use Program

	A*	M	S	C	NA
• Responsibility for animal well-being is assumed by all members of the program (Guide, p 1) [must]	✓				
• IO has authority to allocate needed resources (Guide, p 13)	✓				
• Resources necessary to manage program of veterinary care are provided (Guide, p 14) [must]	✓				
• Sufficient resources are available to manage the program, including training of personnel in accord with regulations and the Guide (Guide, pp 11, 15)	✓				
• Program needs are regularly communicated to IO by AV and/or IACUC (Guide, p 13)	✓				
• Responsibilities for daily animal care and facility management are assigned to specific individual(s) when a full-time veterinarian is not available on site (Guide, p 14) [must]	✓				
• Inter-institutional collaborations are described in formal written agreements (Guide, p 15)	✓				
• Written agreements address responsibilities, animal ownership, and IACUC oversight (Guide, p 15)	✓				

2. Disaster Planning and Emergency Preparedness

	A*	M	S	C	NA
• Disaster plans for each facility to include satellite locations are in place (Guide, p 35, p 75) [must]	✓				
• Plans include provisions for euthanasia (Guide, p 35) [must]	✓				
• Plans include triage plans to meet institutional and investigators' needs (Guide, p 35)	✓				
• Plans define actions to prevent animal injury or death due to HVAC or other failures (Guide, p 35)	✓				
• Plans describe preservation of critical or irreplaceable animals (Guide, p 35)	✓				
• Plans include essential personnel and their training (Guide, p 35)	✓				
• Animal facility plans are approved by the institution and incorporated into overall response plan (Guide, p 35)	✓				
• Law enforcement and emergency personnel are provided a copy and integration with overall plan is in place (Guide, p 35)	✓				

3. IACUC

	A*	M	S	C	NA
• Meets as necessary to fulfill responsibilities (Guide, p 25) [must]	✓				
• IACUC Members named in protocols or with conflicts recuse themselves from protocol decisions (Guide, p 26) [must]	✓				
• Continuing IACUC oversight after initial protocol approval is in place (Guide, p 33)	✓				
• IACUC evaluates the effectiveness of training programs (Guide, p 15)	✓				

4. IACUC Protocol Review - Special Considerations

	A*	M	S	C	NA
• Humane endpoints are established for studies that involve tumor models, infectious diseases, vaccine challenge, pain modeling, trauma, production of monoclonal antibodies, assessment of toxicologic effects, organ or system failure, and models of cardiovascular shock (Guide, p 27)	✓				
• For pilot studies, a system to communicate with the IACUC is in place (Guide, p 28)	✓				
• For genetically modified animals, enhanced monitoring and reporting is in place (Guide, p 28)	✓				
• Restraint devices are justified in the animal use protocols (Guide, p 29) [must]	✓				
• Alternatives to physical restraint are considered (Guide, p 29)	✓				
• Period of restraint is the minimum to meet scientific objectives (Guide, p 29)	✓				
• Training of animals to adapt to restraint is provided (Guide, p 29)	✓				
• Animals that fail to adapt are removed from study (Guide, p 29)	✓				
• Appropriate observation intervals of restrained animals are provided (Guide, p 29)	✓				

• Veterinary care is provided if lesions or illness result from restraint (<i>Guide</i> , p 30) [must]	✓				
• Explanations of purpose and duration of restraint are provided to study personnel (<i>Guide</i> , p 30)	✓				
• Multiple surgical procedures on a single animal are justified and outcomes evaluated (<i>Guide</i> , p 30)	✓				
• Major versus minor surgical procedures are evaluated on a case-by-case basis (<i>Guide</i> , p 30)	✓				
• Multiple survival procedure justifications in non-regulated species conform to regulated species standards (<i>Guide</i> , p 30)	✓				
• Animals on food/fluid restriction are monitored to ensure nutritional needs are met (<i>Guide</i> , p 31)	✓				
• Body weights for food/fluid restricted animals are recorded at least weekly (<i>Guide</i> , p 31)	✓				
• Daily written records are maintained for food/fluid restricted animals (<i>Guide</i> , p 31)	✓				
• Pharmaceutical grade chemicals are used , when available, for animal-related procedures (<i>Guide</i> , p 31)	✓				
• Non-pharmaceutical grade chemicals are described, justified, and approved by IACUC (<i>Guide</i> , p 31)	✓				
• Investigators conducting field studies know zoonotic diseases, safety issues, laws and regulations applicable in study area (<i>Guide</i> , p 32)	✓				
• Disposition plans are considered for species removed from the wild (<i>Guide</i> , p 32)	✓				
• Toe-clipping only used when no alternative, performed aseptically and with pain relief (<i>Guide</i> , p 75)	✓				

5. IACUC Membership and Functions

	A*	M	S	C	NA
• IACUC is comprised of at least 5 members, appointed by CEO (PHS Policy, IV.A.3.)	✓				
• Members include a veterinarian, a scientist, a nonscientist, and a nonaffiliated non-lab animal user (<i>Guide</i> , p 24) ⁱⁱ	✓				
• IACUC authority and resources for oversight and evaluation of institution's program are provided (<i>Guide</i> , p 14)	✓				
• IACUC conducts semiannual evaluations of institutional animal care and use program (PHS Policy, IV.B.)	✓				
• Conducts semiannual inspections of institutional animal facilities (PHS Policy, IV.B.)	✓				
• IACUC organizationally reports to the Institutional Official (PHS Policy, IV.A.1.b.)	✓				
• Methods for reporting and investigating animal welfare concerns are in place (<i>Guide</i> , p 23) [must]	✓				
• Reviews and investigates concerns about animal care and use at institution ⁱⁱⁱ (PHS Policy, IV.B.)	✓				
• Procedures are in place for review, approval, and suspension of animal activities ^{iv} (PHS Policy, IV.B.)	✓				
• Procedures are in place for review and approval of significant changes to approved activities (PHS Policy, IV.B.)	✓				
• Policies are in place for special procedures (e.g., genetically modified animals, restraint, multiple survival surgery, food and fluid regulation, field investigations, agricultural animals) (<i>Guide</i> , p 27-32)	✓				
• Requests for exemptions from major survival surgical procedure restrictions are made to USDA/APHIS ^v (<i>Guide</i> , p 30) [must]	✓				

6. IACUC Training

	A*	M	S	C	NA
• All IACUC members should receive:					
o Formal orientation to institution's program (<i>Guide</i> , p 17)	✓				
o Training on legislation, regulations, guidelines, and policies (<i>Guide</i> , p 17)	✓				
o Training on how to inspect facilities and labs where animal use or housing occurs (<i>Guide</i> , p 17)	✓				
o Training on how to review protocols as well as evaluate the program (<i>Guide</i> , p 17)	✓				
o Ongoing training/education (<i>Guide</i> , p 17)	✓				

7. IACUC Records and Reporting Requirements^{vi}

	A*	M	S	C	NA
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• Semiannual report to the IO (PHS Policy, IV.B.)					
◦ Submitted to IO every 6 months	✓				
◦ Compiles program review and facility inspection(s) results (includes all program and facility deficiencies)	✓				
◦ Includes minority IACUC views	✓				
◦ Describes IACUC-approved departures from the <i>Guide</i> or PHS Policy and the reasons for each departure ^{vii}	✓				
◦ Distinguishes significant from minor deficiencies	✓				
◦ Includes a plan and schedule for correction for each deficiency identified ^{viii}	✓				
• Reports to OLAW (PHS Policy, IV.F.)					
◦ Annual report to OLAW documents program changes, dates of the semiannual program reviews and facility inspections and includes any minority views	✓				
◦ Promptly advises OLAW of serious/ongoing <i>Guide</i> deviations or PHS Policy noncompliance (NOT-OD-05-034)	✓				
◦ Institute must promptly advise OLAW of any suspension of an animal activity by the IACUC (NOT-OD-05-034)	✓				
• Reports to U.S. Department of Agriculture (USDA) or Federal funding agency ^{ix}					
◦ Annual report to USDA contains required information including all exceptions/exemptions	✓				
◦ Reporting mechanism to USDA is in place for IACUC-approved exceptions to the regulations and standards	✓				
◦ Reports are filed within 15 days for failures to adhere to timetable for correction of significant deficiencies	✓				
◦ Promptly reports suspensions of activities by the IACUC to USDA and any Federal funding agency	✓				
• Records (PHS Policy, IV.E.)					
◦ IACUC meeting minutes and semiannual reports to the IO are maintained for 3 years	✓				
◦ Records of IACUC reviews of animal activities include all required information*	✓				
◦ Records of IACUC reviews are maintained for 3 years after the completion of the study	✓				

8. Veterinary Care (See also next section - Veterinary Care)

	A*	M	S	C	NA
• An arrangement for veterinarian(s) with training or experience in lab animal medicine is in place including backup veterinary care ^{xi}	✓				
• Veterinary access to all animals is provided (<i>Guide</i> , p 14) [must]	✓				
• Direct or delegated authority is given to the veterinarian to oversee all aspects of animal care and use (<i>Guide</i> , p 14) [must]	✓				
• Veterinarian provides consultation when pain and distress exceeds anticipated level in protocol (<i>Guide</i> , p 5) [must]	✓				
• Veterinarian provides consultation when interventional control is not possible (<i>Guide</i> , p 5) [must]	✓				
• If part time /consulting veterinarian, visits meet programmatic needs (<i>Guide</i> , p 14)					✓
• Regular communication occurs between veterinarian and IACUC (<i>Guide</i> , p 14)	✓				
• Veterinarian(s) have experience and training in species used (<i>Guide</i> , p 15) [must]	✓				
• Veterinarian(s) have experience in facility administration/management (<i>Guide</i> , p 15)	✓				

9. Personnel Qualifications and Training

	A*	M	S	C	NA
• All personnel are adequately educated, trained, and/or qualified in basic principles of laboratory animal science. Personnel included: [must]					
◦ Veterinary/other professional staff (<i>Guide</i> , p 15-16)	✓				
◦ IACUC members (<i>Guide</i> , p 17)	✓				
◦ Animal care personnel (<i>Guide</i> , p 16)	✓				
◦ Research investigators, instructors, technicians, trainees, and students (<i>Guide</i> , pp 16-17)	✓				
• Continuing education for program and research staff provided to ensure high quality care and reinforce training (<i>Guide</i> , pp 16-17)	✓				
• Training is available prior to starting animal activity (<i>Guide</i> , p 17)	✓				

• Training is documented (<i>Guide</i> , p 15)	✓				
• Training program content includes: (<i>Guide</i> , p 17)					
o Methods for reporting concerns (<i>Guide</i> , p 17)	✓				
o Humane practices of animal care (e.g., housing, husbandry, handling) ^{xii}	✓				
o Humane practices of animal use (e.g., research procedures, use of anesthesia, pre- and post-operative care, aseptic surgical techniques and euthanasia (<i>Guide</i> , p 17) ^{xiii}	✓				
o Research/testing methods that minimize numbers necessary to obtain valid results (PHS Policy, IV.A.1.g.)	✓				
o Research/testing methods that minimize animal pain or distress (PHS Policy, IV.A.1.g.)	✓				
o Use of hazardous agents, including access to OSHA chemical hazard notices where applicable (<i>Guide</i> , p 20)	✓				
o Animal care and use legislation (<i>Guide</i> , p 17)	✓				
o IACUC function (<i>Guide</i> , p 17)	✓				
o Ethics of animal use and Three R's (<i>Guide</i> , p 17)	✓				

10. Occupational Health and Safety of Personnel

See attachment

- * **A** = acceptable
M = minor deficiency
S = significant deficiency (is or may be a threat to animal health or safety)
C = change in program (PHS Policy [IV.A.1.a.-i.](#)) (include in semiannual report to IO and in annual report to OLAW)
NA = not applicable

NOTES: