

VIII. Membership of the IACUC

Date: 8-20-21			
Name of Institution: Angiograf, LLC			
Assurance Number: D17-01010			
IACUC Chairperson			
Name*: Edmund Egan, MD			
Title*: CSO, Chief Medical Officer ONY Inc.		Degree/Credentials*: MD, Researcher	
Address*: 1576 Sweet Home Road Amherst, NY 14228			
E-mail*: eegan@onyinc.com			
Phone*: (b) (6)		Fax*: (b) (6)	
IACUC Roster			
Name of Member/ Code**	Degree/ Credentials	Position Title***	PHS Policy Membership Requirements****
Edmund Egan	MD	Professor of Pediatrics CSO ONY Inc.	Scientist
Noah Seward	DVM	Veterinarian	Veterinarian
(b) (6)			Scientist
			Nonscientist, non affiliate
			Scientist
			Veterinarian
			Scientist

*not a laboratory animal user

* This information is mandatory.

** Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this submission to OLAW. Sufficient information to determine that all appointees are appropriately qualified must be provided and the identity of each member must be readily ascertainable by the institution and available to authorized OLAW or other PHS representatives upon request.

*** List specific position titles for all members, including nonaffiliated (e.g., banker, teacher, volunteer fireman; not "community member" or "retired").

**** PHS Policy Membership Requirements:

Veterinarian veterinarian with training or experience in laboratory animal science and

medicine or in the use of the species at the institution, who has direct or delegated program authority and responsibility for activities involving animals at the institution.

<i>Scientist</i>	practicing scientist experienced in research involving animals.
<i>Nonscientist</i>	member whose primary concerns are in a nonscientific area (e.g., ethicist, lawyer, member of the clergy).
<i>Nonaffiliated</i>	individual who is not affiliated with the institution in any way other than as a member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user. A consulting veterinarian may not be considered nonaffiliated.

X. Facility and Species Inventory

This table should only include animal facilities (including satellite facilities). Listed areas should be directly associated with animal confinement, transport, maintenance, breeding, or experiments (including surgery).

Date: 8/20/21			
Name of Institution: Angiograf LLC			
Assurance Number: D17-01010			
Laboratory, Unit, or Building*	Gross Square Feet [include service areas]	Species Housed [use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog]	Approximate Average Daily Inventory
(b) (4)	140 sq. ft.		0
	60 sq. ft.		0
	50 sq. ft.		0
	220 sq. ft.		0
	140 sq. ft.	Sheep, cats, rats	2
	78 sq. ft.		0
	260 sq. ft.	sheep	3

*Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.