

Southern Illinois University Carbondale  
Institutional Animal Care and Use Committee  
Semiannual Program Review and Facilities Inspections Report  
March 2021

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Program Review  
Date: March 16, 2021

Members in Attendance: Dr. Karen Jones, Dr. Ami Ruffing, Dr. Jen Harris, Ms. Carolyn Skouby, Dr. Joe Scimeca, Dr. Jim Lovvorn

**Institutional Policies and Responsibilities**

**Significant Deficiencies**

None

**Minor Deficiencies**

1. "IO has the authority to allocate needed resources."

**Description:** Although the IO has the authority, the committee feels that needed resources are lacking for some infrastructure maintenance, such as repainting and repairing floors in the vivaria.

**Plan for Correction:** The IO will continue to advocate for funding for ongoing facility and maintenance issues in the vivaria.

**Correction Schedule and Interim Status:** Continuous and ongoing

2. "Law enforcement and emergency personnel are provided a copy (of the disaster plan) and integration with overall plan is in place."

**Description:** While the Laboratory Animal Program and the Farms have established emergency plans and forwarded them to the administration, we do not know if the University has an overall emergency plan.

**Plan for Correction:** The Office of Research Compliance (ORC) will reach out to the Office of Public Safety (OPS) to see if an overall disaster plan exists, if the Vivarium and Farms plans are incorporated, and if the plan is periodically updated.

**Correction Schedule and Interim Status:** ORC will send a memo to OPS asking about the status of an overall University emergency plan.

**Deadline:** ORC memo to OPS by March 31, 2021.

## **Veterinary Care**

### **Significant Deficiencies**

None

### **Minor Deficiencies**

1. "Appropriate records are maintained on animal acquisition."

**Description:** The Laboratory Animal Program maintains records of animal acquisition for the vivaria; however, the Farms Beef, Swine and Equine units, and the Fisheries unit, do not report to IACUC when animals are acquired or disposed.

**Plan for Correction:** The IACUC and the Office of Research Compliance will reach out to the Farms units and the Fisheries unit to design a method of animal acquisition and disposal reporting.

**Correction Schedule and Interim Status:** Initial outreach to the units by March 31, 2021.

**Due date:** Ongoing after initial outreach

Facilities Inspection: Life Science II Vivarium  
Date: March 8, 2021

Members in Attendance: Lydia Arbogast, Greg Whitley

**Significant Deficiencies:**

None

**Minor Deficiencies:**

1. Rooms and hallways

**Description:** Flooring is cracked, and paint is flaking throughout the facility.

**Plan for Correction:** In discussion with IO to secure funding.

**Correction Schedule and Interim Status:** TBD

**Due date:** Continuous and ongoing

2. Refrigerator in Necropsy Room

**Description:** The refrigerator does not have a sign that says "No Food or Drink."

**Plan for Correction:** Install said sign.

**Correction Schedule and Interim Status:** Sign posted on March 18, 2021.

**Due Date:** Continuous and ongoing.

Facilities Inspection: Life Science III Vivarium  
Date: March 8, 2021

Members in Attendance: Lydia Arbogast and Greg Whitledge

**Significant Deficiencies:**

None

**Minor Deficiencies:**

1. Rooms and hallways

**Description:** Flooring is cracked, and paint is flaking throughout the facility.

**Plan for Correction:** In discussion with IO to secure funding.

**Correction Schedule and Interim Status:** TBD

**Due date:** Continuous and ongoing

3. Cage cards in Davie's room

**Description:** Cage cards in Judy Davie's room were outdated, bearing the old protocol number and incorrect litter dates.

**Plan for Correction:** ORC will send a memo requesting that Dr. Davie update cage cards.

**Correction Schedule and Interim Status:** Memo sent on March 18, 2021.

**Due date:** Re-inspect room April 1, 2021.

Facilities Inspection: McLafferty Aquarium  
Date: March 9, 2021

Members in Attendance: Karen Jones, Jim Lovvorn

**Significant Deficiencies**

None

**Minor Deficiencies**

1. Recordkeeping of Daily Observation and Feeding

**Description:** In the zebrafish area of McLafferty Aquarium, the daily care logs don't have a year date on them.

**Plan for Correction:** ORC will contact the PI and remind her to include the year on the daily logs.

**Schedule of Correction and Interim Status:** ORC issued a memo to Dr. Kwasek on March 18, 2021.

**Deadline:** Re-inspect area on April 30, 2021.

2. Recordkeeping of Daily Observation and Feeding for Silversides in McLafferty Aquarium

**Description:** In the silverside area of McLafferty Aquarium, the tanks had no protocol number posted, and the daily logs could not be identified from all the outdated records there, because the records did not include a year number.

**Plan for Correction:** ORC will issue a memo to Dr. Lydy to post the protocol number on the tanks, to discard old records, and to include the year number on new records.

**Schedule of Correction and Interim Status:** Memo issued to Dr. Lydy on March 18, 2021,

**Deadline:** Re-inspect the area on April 30, 2021.

3. Expired food

**Description:** One container of food was found in the silversides area in McLafferty Aquarium that had expired the preceding week, on March 1, 2021.

**Plan for Correction:** Outdated food must be disposed.

**Schedule of Correction and Interim Status:** Memo from ORC was sent to Dr. Lydy on March 18, 2021.

**Deadline:** Re-inspect area on April 30, 2021.

#### 4. Protocol numbers for Sturgeon

**Description:** The Sturgeon in McLafferty Aquarium have been moved to the production protocol, but the tanks still are labeled for the old expired research protocol,

**Plan for Correction:** Dr. Whitledge must re-label the tanks with the new protocol number.

**Schedule of Correction and Interim Status:** Memo from ORC was sent to Dr. Whitledge on March 18, 2021.

**Deadline:** Re-inspect area on April 30, 2021.

Facilities Inspection: Old Fisheries Annex  
Date: March 9, 2021

Members in Attendance: Karen Jones, Jim Lovvorn

**Significant Deficiencies**

None

**Minor Deficiencies**

1. Protocol numbers and recordkeeping in Fisheries Annex

**Description:** Some of the tanks in the Fisheries Annex exhibited old protocol numbers, and the daily logs were difficult to decipher, because old logs were mixed in for fish that were no longer in the Annex.

**Plan for Correction:** The investigators must post accurate protocol numbers on the tanks, dispose the old log books that apply to fish no longer present, and straighten out and organize the daily observation and feeding records for the fish.

**Schedule of Correction and Interim Status:** Memo from ORC was sent to Dr. Kwasek on March 18, 2021.

**Deadline:** Re-inspect area on April 30, 2021.

2. Outdated bags of food in walk-in freezer outside Fisheries Annex.

**Description:** The walk-in freezer outside the Fisheries Annex has many bags of food frozen - some frozen to the shelves - that are outdated. This freezer was used by investigators who are no longer associated with the University, and it is difficult to determine who is responsible for cleaning out the freezer.

**Plan for Correction:** Consult with the IO to determine to whom the responsibility for cleaning out the freezer should be assigned.

**Schedule of Correction and Interim Status:** Meet with IO to help determine responsible party, and consult with CEHS to determine best method of disposal.

**Deadline:** Meet with IO by March 31; sequelae are continuous and ongoing.



Facilities Inspection: Farms  
Date: March 8, 2020

Members in Attendance: Vjollca Konjufca, Stacia Weinhover

Beef Center

**Significant Deficiencies**

None

**Minor Deficiencies**

1. Construction: Animal Room Doors

**Description:** The west door on the quarantine barn was derailed, damaged, laying on the ground with mangled sheet metal.

**Plan for Correction:** The door must be repaired and re-hung for the safety of both animals and humans.

**Schedule for Correction and Interim Status:** IACUC will inform the Farms administration of the deficiency and request remediation. IACUC will do a follow-up inspection to confirm that the deficiency has been remediated.

**Deadline:** September 2021

## 2. Sharps container

**Description:** The sharps container had re-capped sharps in it, from last year. The practice of re-capping sharps has stopped (the newer syringes on top were not re-capped) but the container was not yet disposed, because it is not full.

**Plan for Correction:** Dispose sharps container through CEHS, and replace with new container. Label the new container "Do Not Re-cap Sharps."

**Schedule for Correction and Interim Status:** ORC sent memo to the beef center manager on March 18, 2021.

**Deadline:** Re-inspect the area in September 2021.

## Equine Center

### Significant Deficiencies

None

### Minor Deficiencies

#### 1. Sharps container

**Description:** The sharps container had re-capped sharps in it, from last year. The practice of re-capping sharps has stopped (the newer syringes on top were not re-capped) but the container was not yet disposed, because it is not full.

**Plan for Correction:** Dispose sharps container through CEHS, and replace with new container. Label the new container "Do Not Re-cap Sharps."

**Schedule for Correction and Interim Status:** ORC sent memo to the beef center manager on March 18, 2021.

**Deadline:** Re-inspect the area in September 2021.

#### 2. Outdated medication

**Description:** The refrigerator in the Equine Physiology Metabolism Center contained outdated medication.

**Plan for Correction:** The outdated medications must be disposed.

**Schedule for Correction and Interim Status:** ORC sent a memo to the investigator on March 18, 2021.

**Deadline:** Re-inspect the refrigerator in September 2021.

## Swine Center

### Significant Deficiencies

None

### Minor Deficiencies

#### 1. Crowding in the Production/Grow Barn

**Description:** The growing weaned pigs in the production barn are so crowded that they have difficulty getting to food and water, since they must step on each other to move around.

**Plan for Correction:** The herd must be reduced to a size acceptable for the pen area.

**Schedule for Correction and Interim Status:** Twenty pigs were sold on March 17, and more are scheduled to be sold on March 24. Swine sales are every Wednesday. The swine manager must communicate with IACUC to report how many pigs are left after March 24.

**Deadline:** Ongoing. Swine manger will report to IACUC when pigs are sold and how many remain in the herd. The area will be re-inspected on March 31.

#### 2. The lock on the production/grow barn is not functioning.

**Description:** The lock on the production/grow barn is nonfunctional. A request to Physical Plant to repair the lock was submitted on February 15, 2021.

**Plan for Correction:** The farm manager will contact Physical Plant to find out when the lock can be repaired.

**Schedule for Correction and Interim Status:** ORC sent a memo to the Farm Manager on March 18, 2021, requesting that he contact Physical Plant.

**Deadline:** The area will be re-inspected on March 31, 2021.

Facilities Inspection: Life Science II Investigator Laboratories  
Date: March 8, 2021

Members in Attendance: Jennifer Harris, Ami Ruffing

Significant Deficiencies

None

Minor Deficiencies

1. Room 8D, Dr. Michael Hylin: Recordkeeping

**Description:** The IACUC binder should contain the new protocol approved for Dr. Hylin a few months ago, and should contain his training record.

**Plan for Correction:** ORC will notify Dr. Hylin of the deficiencies by memo.

**Schedule for Correction and Interim Status:** Memo sent on March 18, 2021.

**Deadline:** Area will be re-inspected April 30, 2021.

2. Room 8D, Dr. Michael Hylin: Food labeling

**Description:** There is a plastic container of cereal used for rat treats in behavioral testing that does not have an expiration date.

**Plan for Correction:** ORC will notify Dr. Hylin of the deficiency.

**Schedule for Correction and Interim Status:** Memo sent on March 18, 2021.

**Deadline:** Area will be re-inspected on April 30, 2021.

3. Room complex 61, Dr. Robin Warne

**Description:** There are three doors in the complex to room used to house animals. No animals are present, but each door has a sign that is outdated, listing the number of animals present and some graduate students' contact information that is out of date.

**Plan for Correction:** ORC will notify Dr. Warne of the deficiencies by memo.

**Schedule for Correction and Interim Status:** Memo sent on March 18, 2021.

**Deadline:** Area will be re-inspected on April 30, 2021.

Facilities Inspection: Life Science III Investigator Laboratories  
Date: March 12, 2021

Members in Attendance: Dr. Ami Ruffing, Dr. Jen Harris

Significant Deficiencies

None

Minor Deficiencies

1. Labs 2003, Dr. Joe Cheatwood; 2029, Dr. Prema Narayan; 2053, Dr. Phil Jensik: sharps containers

**Description:** A few re-capped sharps were found in older sharps containers. The practice of re-capping sharps has stopped (the newer syringes on top do not have re-capped sharps) but the containers were not disposed because they are not yet full.

**Plan for Correction:** Each of the investigators will be notified by memo and asked to file a waste pickup request with CEHS for the older sharps containers.

**Schedule for Correction and Interim Status:** Investigators notified by memo on March 18, 2021.

**Deadline:** Areas will be re-inspected before September 6, 2021.

2. Labs 2025, Dr. Lydia Arbogast, 2029, Dr. Prema Narayan, and 2003, Dr. Joe Cheatwood: training and records

**Description:** In Dr. Arbogast's lab, one of her student's CITI refresher training has recently expired, and must be done. In Dr. Narayan's lab, her training record is missing. According to ORC records, her training is up-to-date and complete. In Dr. Cheatwood's lab, two of his students' training has recently expired, and the refresher training must be completed.

**Plan for Correction:** The investigators will be notified of the deficiencies by memo.

**Schedule for Correction and Interim Status:** Investigators were notified by memo on March 18, 2021.

**Deadline:** Areas will be re-inspected before September 6, 2021.

3. Lab 2018, Dr. Patrick Zheng: Floor is dirty.

**Description:** In Dr. Zheng's lab, the floor is dirty. Building Services normally cleans floors, but will not enter a lab unless requested to do so.

**Plan for Correction:** Dr. Zheng will be notified of the deficiency by memo.

**Schedule for Correction and Interim Status:** Dr. Zheng was notified by memo on March 18, 2021. It was suggested that he call Building Service to request that the floor be cleaned.

**Deadline:** Area will be re-inspected before September 6, 2021.