

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

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Program Review
Date: September 24, 2021

Members in Attendance: Dr. Karen Jones, Dr. Ami Ruffing, Dr. Jen Harris, Ms. Liz Gersbacher, Dr. Ed Heist, Dr. Jim Lovvorn, Dr. Vjollca Konjufca

Institutional Policies and Responsibilities

Significant Deficiencies

None

Minor Deficiencies

None.

Last March, six minor deficiencies in the program were noted, and all have been corrected.

Veterinary Care

Significant Deficiencies

None

Minor Deficiencies

1. "Procurement is linked to IACUC review and approval."

Description: While animals housed in the Vivarium have records of procurement, IACUC does not receive reports from the production herds of swine and beef cattle at the farms.

Plan for Correction: IACUC administration will contact the Farm Manager and ask him to send a report when animals are procured, born, die, or sold, on a monthly basis.

Correction Schedule and Interim Status: Letter to Farm Manager will be sent by September 30, 2021.

Facilities Inspection: Life Science II Vivarium

Date: August 30, 2021

Members in Attendance: Dr. Karen Jones, Ms. Amanda Ingram, Dr. Vjollca Konjufca, Dr. Jim Lovvorn, Dr. Jennifer Harris, Dr. Ami Ruffing

Significant Deficiencies:

1. Room 61 complex, husbandry provide by PI staff

Description: This room had no protocols and no training records in the IACUC binder. There were animals present in two of the rooms (amphibians) and there were no records of daily observation, husbandry, feeding, water quality check, room cleaning.

Plan for Correction: The PI, Dr. Robin Warne, was contacted regarding the missing records and given a 5-day deadline to correct the deficiencies.

Correction Schedule and Interim Status: The area was re-inspected at the deadline, and all issues had been remediated. Protocols and training records were present and complete; daily observations and logs of care were present and complete; cleaning schedule was established.

Minor Deficiencies:

1. Flooring and paint

Description: The walls, doors and ceilings need to be repainted, and the floors need to be re-finished with epoxy. We received a cost estimate of \$530,000 from physical plant for the work to be done in the LS II Vivarium and the LS III Vivarium.

After discussion with the IO, he requested that this project be placed on the list of projects to be completed with "deferred maintenance" funds sent by the State of Illinois.

Correction Schedule and Interim Status: TBD

2. Food

Description: The guinea pig hay is in an open bag. The cold room food storage bags have a manufacturer's code on them, rather than an expiration date.

Plan for Correction: The guinea pig hay was placed in a sealed plastic container. The manufacturer was contacted regarding the meaning of the codes (how to determine expiration date) and they wrote back with the information. They also indicated that they had decided to change their coding system so that the expiration date would be obvious.

Correction Schedule and Interim Status: Guinea pig hay was placed in a lidded container the same day as the inspection. The manufacturer replied within a few days, and the bags were appropriately labeled.

Deadline: Deficiency remediated.

3. Cage Cards

Description: While all cages had cards, they looked messy and not uniform. Additional information had been written on some of the cards, which could be confusing.

Plan for Correction: All PIs were contacted and instructed to replace all the cage cards prior to the AAALAC inspection. Blank cards are available in the foyer to the Laboratory Animal Program office.

Correction Schedule and Interim Status: Cage cards will be re-examined by October 15, and those PIs who have not updated the cards will be reminded to do so.

Facilities Inspection: Life Science III Vivarium

Date: August 30, 2021

Members in Attendance: Dr. Karen Jones, Ms. Amanda Ingram, Dr. Vjollca Konjufca, Dr. Jim Lovvorn, Dr. Jennifer Harris, Dr. Ami Ruffing

Significant Deficiencies:

None

Minor Deficiencies:

1. Flooring and paint

Description: The walls, doors and ceilings need to be repainted, and the floors need to be re-finished with epoxy. We received a cost estimate of \$530,000 from physical plant for the work to be done in the LS II Vivarium and the LS III Vivarium.

After discussion with the IO, he requested that this project be placed on the list of projects to be completed with “deferred maintenance” funds sent by the State of Illinois.

Correction Schedule and Interim Status: TBD

2. Cage Cards

Description: While all cages had cards, they looked messy and not uniform. Additional information had been written on some of the cards, which could be confusing.

Plan for Correction: All PIs were contacted and instructed to replace all the cage cards prior to the AAALAC inspection. Blank cards are available in the foyer to the Laboratory Animal Program office.

Correction Schedule and Interim Status: Cage cards will be re-examined by October 15, and those PIs who have not updated the cards will be reminded to do so.

3. Autoclave Test Date

Description: The record poster on the autoclave in Room 1082 indicated that it had not been tested in the last year.

Plan for Correction: IACUC administrative office will contact CEHS, the campus unit that does the autoclave tests, and ask them to test the autoclave.

Correction Schedule and Interim Status: CEHS was contacted the following day. They indicated that the autoclave had been tested and it passed, but the poster had not been updated. The sent personnel over to update the poster the following week.

Facilities Inspection: McLafferty Aquarium
Date: August 31, 2021

Members in Attendance: Dr. Jennifer Harris, Dr. Ed Heist, Dr. Joe Cheatwood, Ms. Amanda Ingram, Dr. Jim Lovvorn, Dr. Ami Ruffing

Significant Deficiencies

None

Minor Deficiencies

1. Cage/tank cards

Description: Dr. Lydy's fathead minnow aquaria are marked with the old protocol number instead of the new number. No animals were present.

Plan for Correction: Dr. Lydy was contacted about changing the numbers on the aquaria on September 7. He replied that he had corrected the situation on September 9.

Correction Schedule and Interim Status: Deficiency remediated on September 9, 2019.

2. Food

Description: the salmon food in the white bucket near the salmon aquaria was undated.

Plan for Correction: Dr. Lydy was contacted about dating the food on September 7; he replied on September 9 that he had completed the item.

Correction Schedule and Interim Status: Deficiency remediated on September 9, 2021.

Facilities Inspection: Old Fisheries Annex
Date: August 31, 2021

Members in Attendance: Dr. Jennifer Harris, Dr. Ed Heist, Dr. Joe Cheatwood, Ms. Amanda Ingram, Dr. Jim Lovvorn, Dr. Ami Ruffing

Significant Deficiencies

None

Minor Deficiencies

1. Food

Description: The sturgeon feed in the plastic trash can was expired, and insects had infested the food.

Plan for Correction: IACUC administrator wrote to Dr. Whitledge on September 7, requesting that he discard the old food and also the old, cracked trash can to keep insects out of the food.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

Facilities Inspection: Farms
Date: September 1, 2021

Members in Attendance: Dr. Karen Jones, Dr. Jen Harris, Dr. Jim Lovvorn, Dr. Buffy Ellsworth, Dr. Ed Heist, Ms. Amanda Ingram, Dr. Erin Perry

Beef Center

Significant Deficiencies

None

Minor Deficiencies

None

Please note that during the last semiannual inspection (March 2021) there were multiple issues described. All of those issues have been addressed. Recordkeeping had been a very weak area for the farms in general, and this issue is greatly, greatly improved.

Equine Center

Significant Deficiencies

None

Minor Deficiencies: Physiology Metabolism Center, Dr. Eduardo Gastal

1. Outdated lubricant

Description: In the refrigerator in the office area, and in the closet in the room with the stanchions, two outdated bottles of lube were stored.

Plan for Correction: Dr. Gastal was notified of the outdated items on September 9, and asked to discard them by October 15, 2021.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

2. Leaking bleach

Description: In the green-painted room there is a leaking container of bleach on the wooden shelf in the cabinet next to the sink; the bleach should be discarded and the spill cleaned.

Plan for Correction: Dr. Gastal was notified of the leaking bottle on September 9 and asked to clean the spill up by October 15, 2021.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

3. Unlabeled and undated food

Description: In the room with the old stanchions, there is a metal trash can with unlabeled and undated food.

Plan for Correction: Dr. Gastal was notified of the undated food on September 9, and asked to discard it by October 15, 2021.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

Swine Center

Significant Deficiencies

None

Minor Deficiencies

None

Please note that last seminannual inspection, there were several items to be remediated. The physical facilities at the Swine Center, the recordkeeping, and the use of Standard Operating Procedures has greatly improved.

Facilities Inspection: Life Science II Investigator Laboratories

Date: September 2, 2021

Members in Attendance: Dr. Karen Jones, Dr. Jennifer Harris, Ms. Amanda Ingram, Dr. Vjollca Konjufca, Dr. Ami Ruffing

1. Room 8D, Dr. Mike Hylin

Description: The IACUCU binder needs a copy of the new protocol, and Dr. Hylin needs to include a training record for himself, as well as his students.

Plan for Correction: Dr. Hylin was notified of the need for a copy of his new protocol, and a training record for himself, on September 8, 2021. Also included in the letter was a copy of his new protocol, and a training record for him, with his current CITI training completion dates included. He must print these out and place them in the binder by October 15, 2021

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

2. Room 8D, Dr. Mike Hylin

Description: All the treat food for the rats is expired, and should be discarded.

Plan for Correction: Dr. Hylin was notified of the expired food on September 8, 2021.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

3. Room 127, Dr. Vjollca Konjufca

Description: The refrigerator and microwave need a sign reading "No Food or Drink."

Plan for Correction: Dr. Konjufca was notified of this deficiency on September 8, 2021

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

4. Room 127, Dr. Vjollca Konjufca

Description: Although student training records are present, there is no training record for Dr. Konjufca.

Plan for Correction: Dr. Konjufca was sent a training record on September 8 with her CITI dates of training included. She has to print this and put it in the binder, and add any other training.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

Facilities Inspection: Life Science III Investigator Laboratories
Date: September 3, 2021

Members in Attendance: Dr. Buffy Ellsworth, Dr. Jennifer Harris, Ms. Amanda Ingram, Dr. Ami Ruffing, Dr. Ed Heist, Dr. Joe Cheatwood, Dr. Jim Lovvorn

1. Lab 2001, Dr. Joe Cheatwood

Description: Dr. Cheatwood had student training records, but not one for himself. The refrigerator should have a sign reading "No Food or Drink."

Plan for Correction: The IACUC Administrator sent Dr. Cheatwood a training record form with the dates of his latest CITI training included, on September 8, 2021. He was reminded in this memo that he needed to label the refrigerator.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.

2. Lab 2053, Dr. Phil Jensik

Description: The copy of the IACUC protocol found in the binder didn't include the approval and expiration date.

Plan for Correction: The IACUC Administrator sent a copy of the approved protocol to Dr. Cheatwood which includes the approval date and expiry date; he was instructed to print it out and put it in the binder.

Correction Schedule and Interim Status: Area will be re-inspected by October 15, 2021.