### **Annual Report to OLAW**

Institution: TULANE UNIVERSITY
Assurance Number: A4499-01
Reporting Period: October 1, 2020 thru September 30, 2021

This institution's Institutional Animal Care and Use Committee (IACUC), through the Institutional Official, provides this annual report to the Office of Laboratory Animal Welfare (OLAW).

I. Program	Changes	Select A	<i>or B</i> 1
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- [ ] A. There have been **no changes** in this institution's program for animal care and use as described in the Assurance. [Skip to Item II.]
- [X] B. Change(s) in this institution's program for animal care and use as described in the Assurance have occurred during this reporting period. (FAQ 6)

Select all that apply:

]	]	This ins	stitution's AAALAC accreditation status has changed (PHS Policy IV.A.2.).
		[ ]	AAALAC Accredited - Category 1
		[ ]	Non-Accredited – Category 2
[	]		stitution's program for animal care and use has changed ( <u>PHS Policy IV.A.1.a-i.</u> ). [Attach a full tion of the changes.]
_	,		

[ ] The individual designated by this institution as the Institutional Official has changed. [Provide name, title(s), address, e-mail, phone, and fax numbers in Item V.]

[X] The membership of this institution's IACUC has changed. [Provide current roster of members in Item VI.]

#### II. Semiannual Evaluations

This IACUC has conducted semiannual evaluations of the institution's program and inspections of the institution's facilities (including satellite facilities) on the dates below. Reports of the evaluations and inspections have been submitted to the Institutional Official. The reports include any IACUC-approved departures from the *Guide* with a reason for each departure, any deficiencies (significant or minor) that were identified, and a plan and schedule for correction of each deficiency. [Do not provide semiannual reports unless they include a minority view.]

#### A. Program Evaluations

[Two dates (month/day/year) must be provided to satisfy the PHS Policy requirement that evaluations be done at 6 month intervals. If the IACUC conducted more than 2 evaluations of the program during the reporting period, please attach a list showing the dates.]

Date 1:	Date 2:
(NOC) March 17, 2021	(NOC) October 20, 2021
(TNPRC) October 14, 2020	(TNPRC) April 1, 2021

### **B.** Facility Inspections

[Two dates (month/day/year) must be provided to satisfy the PHS Policy requirement that facility inspections be done at 6 month intervals. If the IACUC conducted more than 2 inspections of each site during the reporting period, please attach a list showing the dates.]

Date 1:	Date 2:
(NOC) March 11-29, 2021( OLAW waiver for COVID)	(NOC) September 23- October 14, 2021
(TNPRC) April 26 – June 24, 2021 (OLAW waiver for	
COVID)	

## III. Minority Views [Select A or B]

- [X] A. There were **no minority** views during this reporting cycle.
- [ ] B. Any minority views submitted by members of the IACUC regarding reports filed under <u>PHS Policy IV.F.</u> for this reporting cycle are attached.

### IV. Signatures

IACUC Chairperson	Institutional Official				
Name: Preston Marx, PhD	Name: Giovanni Piedimonte, MD, FAAP, FCCP				
Preston A  Non Preston A Marx, o Tulane University, ou IACUC, email primarighulane.edu, c US Date 2021.12.03 19 09 31 -08700*	Giovanni Digitally signed by Giovanni Piedimonte Date: 2021.12.06 08:58:42-06'00'				
Date:	Date:				

## V. Change in Institutional Official

Name:	
Title:	Degree/Credential:
Name of Institution:	
Address: [street, city, state, zip code]	
E-mail:	
Phone:	Fax:

# VI. Change in IACUC Membership [Current roster]

Institution: TULANE UNIVERSITY				
IACUC Contact Information				
Address: [street, city, state, zip code] 1430 TULANE AVE MB #8423 NEW ORLEANS, LA 70112				
E-mail: pmarx@tulane.edu, ia	cuc@tulane.edu			
Phone: (b) (6)			Fax: (b) (6)	
IACUC Chairperson				
Name: Preston Marx				
Title: Chair, IACUC			Degree/Credentials: PhI	)
IACUC Roster [Provide belo	w or attach]			
Name of Member/ Code <sup>*</sup>	Degree/ Credential	Oc	sition Title/ cupational ckground**	PHS Policy Membership Requirements***
New Orleans Campus Roster				
Gina Dobek Direct Program Authority	DVM, DACLAM	Co	rector Department of mparative Medicine CM), Assistant Professor	Attending Veterinarian (AV)
			(b) (d	Veterinarian, Alternate to AV
				Scientist
				Scientist (Alternate to (b) (6)
				Nonscientist
				Nonaffiliated
				Scientist
				Scientist
				Scientist
				Nonscientist
				Scientist
				Scientist
				Scientist (Alternate to any Scientist)
				Scientist/ Vice Chair
				Scientist

				b) (6)	
			(	(v) (v)	Scientist / 2 <sup>nd</sup> Vice Chair
					Ad-hoc
					Ad-hoc
TNPRC Roster					
IACUC Chairperson					
Name: Preston Marx					
Title: Chair, IACUC			Degree/Credentials: P	hD	
IACUC Roster [Provident	le below or attach	<i>i</i> ]			
Name of Member/ Code <sup>*</sup>	Degree/ Credential	Position Backgro			PHS Policy Membership Requirements***
			(	b) (6)	Scientist
Rudolf P. Bohm Direct Program Authority	DVM, DACLAM		nn, Division of Veterina e, Professor of Clinical e		Attending Veterinarian (AV)
			(	b) (6)	Nonaffiliated / Nonscientist
					Scientist
					Veterinarian, Vice Chair
					Veterinarian
					Caiantint
					Scientist
					Scientist
					Scientist
					Scientist
					Veterinarian (alternate to AV or (b) (6)
					Veterinarian (alternate to
					Scientist
					Scientist / 2 <sup>nd</sup> Vice Chair
					Ad-hoc

\* Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this report 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 Weterinarian 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.

Scientist Practicing scientist experienced in research involving animals.

Nonscientist Member whose primary concerns are in a nonscientific area (for example, ethicist, lawyer,

member of the clergy).

Nonaffiliated 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.

[Note: all members must be appointed by the CEO (or individual with specific written delegation to appoint members) and must be voting members. Non-voting members and alternate members must be so identified.]