

VOTING MEMBERS PRESENT:	Dr. Robert Rose (AV), 1051, 1076, 1067, 1059, 1046, 1052, 1081(A), 1085, 1039, 1071, 1075, 1083(A), 1028, 1066, 1016, 1087(A)
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	Dr. Mark Westhusin (Chair), 1053, 1040, 1062, 1049, 1068, 1079, 1082, 1004, 1011, 1077
ALTERNATE MEMBERS ABSENT:	1063, 1084, 1035, 1069, 1012, 1086, 1080, 1072
VISITORS PRESENT:	Assistant Director, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research; Risk and Compliance Coordinator, Texas A&M AgriLife Research; Compliance Officer I, Texas A&M AgriLife Research

CALL TO ORDER:

- The Meeting was formally called to order at 12:30 PM by the Vice Chair. The meeting quorum is 13 members. Twelve voting members were present when the meeting was called to order.
- The Vice Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- The Vice Chair asked committee members to make a note in the group chat feed if they need to leave before the meeting concludes in order to keep track of the members present and ensure quorum is maintained.

I. ANNOUNCEMENTS:

A. Next IACUC meeting

1. The next IACUC meeting will take place at 12:30 PM, July 15th 2021. The meeting will be conducted via Zoom.

[12:32pm – Member 1081 entered]

B. Upcoming Inspections

1. AWO staff will send an email to solicit volunteers for upcoming inspections.
2. Upcoming Inspections
 - a) **GHRC – June TBD, 2021.** No volunteers are needed for this in-person inspection.
 - b) **WFES & HLKN – June 22, 2021.** No volunteers are needed for this virtual inspection.
 - c) **MSRB – July 7, 2021.** One volunteer is needed for this in-person inspection.
 - d) **VBEC – July 8, 2021.** One volunteer is needed for this in-person inspection.
 - e) **BSBW, BSBE, & BTLR – July 8, 2021.** One volunteer is needed for this in-person inspection.

[12:33pm – Member 1052 entered]

C. Membership Change

1. The Vice Chair informed members of the upcoming retirement of an IACUC member (member 1035).

D. Continuing Education Opportunities for IACUC Members

1. The AWO Director informed members of upcoming training opportunities. Members were reminded to inform the AWO of any training completed.
 - a) **ICARE Dialogues: IACUC Responsibilities for Wildlife Research – June 23, 2021, 12:30-2:30pm.**
 - 1) Members were encouraged to register themselves for this event and reminded to provide the certificate of completion to the AWO after attendance.
 - 2) <https://events.espinc-usa.com/icaredialogues2021>

E. Pentobarbital Shortage

1. The AWO Director informed members that the Food and Drug Administration Center for Veterinary Medicine has received reports of pentobarbital shortages and is trying to determine the root cause and possible avenues for resolution. The FDA CVM maintains an Animal Drug Shortage Information website, which may be helpful during drug shortages. The American Veterinary Medical Association (AVMA) has provided guidance about potential alternatives to pentobarbital that comply with the AVMA Guidelines for the Euthanasia of Animals: 2020 Edition. OLAW reminds institutions that a change in euthanasia must be reviewed by the IACUC or verified by VVC.
2. OLAW: <https://olaw.nih.gov/news/pentobarbital-back-orders-and-potential-alternatives.html>
3. FDA CVM: <https://www.fda.gov/animal-veterinary/product-safety-information/animal-drug-shortage-information>
4. AVMA: <https://www.avma.org/blog/pentobarbital-back-orders-and-potential-alternatives>

[12:35pm – Member 1083 entered]

[12:36pm – Member 1046 entered]

II. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the May 20, 2021 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. The majority of findings with timelines for correction at the end of May and the beginning of June have been addressed, but several items require clarifications and/or extensions of timetables for correction.
 - a) RELLIS – An Amendment to an AUP is required to clarify Housing/Procedure locations, but the PI is having difficulty submitting it in iRIS. A timetable for correction extension was requested for July 1, 2021 to give them additional time to get the amendment submitted.
 - b) CVM-L – AWO staff reported that an inspector recommendation related to expired drugs was written into the report as a deficiency. After consultation with the inspector, the request was made to strike the finding from the report.
 - c) REYN – A room number typo was made in the original inspection report and a deficiency noting an expired fume hood was counted twice. A request was made to strike the duplicate entry from the inspection findings.
 - d) CHEM – A lab in this facility was missing an animal allergen alert sign during the last inspection. AWO staff would have delivered a sign to the lab during the next in-person inspection but the lab has not conducted animal work in the past six months, nor plan to conduct animal work in the next six months and the inspection was postponed. A timetable for correction extension for posting the allergen alert sign was requested for December 31, 2021 (in the event the lab will be inspected on the next inspection cycle).
 - e) TAMUG – An Amendment was submitted in response to an inspection finding, but was submitted after the timetable for correction date. The AWO requested the IACUC consider accepting the finding corrected and extend the timetable for correction to June 9, 2021 (the date of submission).
 - f) **Approved (by majority vote):** as indicated above.

III. NEW BUSINESS:

A. Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. A subcommittee composed of the IACUC inspectors for the recently-inspected facilities have approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction. The resulting inspection findings and outcome were presented for the IACUC's information.
2. **WEAC* – Conducted April 9, 2021 (Member 1075) – approved via subcommittee May 24, 2021**
 - a) During this inspection approximately 37 individual locations were inspected and 1 finding noted related to Records – other. A corrective action and timeline for correction was established by the subcommittee – involving a request for submission of TAMU-F-013. The finding was classified as minor.

3. **CVM– S– Labs – Conducted April 23 & 30, 2021 (Members 1077, 1039) – approved via subcommittee May 23, 2021**
 - a) During this inspection approximately 16 individual locations were inspected and six findings noted related to EHS – human safety, Expired – cleaning/disinfectant, Improper storage – food/water, Improper-no label, Occ. Health – human safety, and Other. A corrective action and timeline for correction was established by the subcommittee – involving posting allergen alert signs, submitting an Amendment, providing confirmation for several things, and labeling feed. All findings were classified as minor.
4. **VMP* – Conducted April 27, 2021 (Members 1039, 1074) – approved via subcommittee May 27, 2021**
 - a) During this inspection approximately 252 individual locations were inspected and 18 findings noted related to Cleaning/Environment, EHS – human safety, Expired – drugs/substances, Facility Repair & Function, Improper sharps use, Improper storage – other, Improper/no label, Improper storage – food/water, Primary enclosure, Records – Other. A corrective action and timeline for correction was established by the subcommittee – involving discarding materials, confirming several things, ensuring stall cards visible, ensuring animals are provided additional shelter areas. All findings were classified as minor.
5. **TIGM – Conducted May 11, 2021 (Members 1039, 1078) – approved via subcommittee June 3, 2021**
 - a) During this inspection approximately 40 individual locations were inspected and one finding was noted related to Facility Repair & Function. A corrective action and timeline for correction was established by the subcommittee – involving confirmation an animal area would not be used until repairs made. The finding was classified as minor.
6. **Reynolds – Conducted May 13 & 19, 2021 (1071, 1016) – approved via subcommittee May 27, 2021**
 - a) During this inspection approximately 30 individual locations were inspected and seven findings were noted related to Animal records – daily care, EHS – human safety, Facility Repair & Function, Occ. Health – human safety and Records – Other. A corrective action and timeline for correction was established by the subcommittee – involving providing allergen alert signs, confirming actions, and submitting an Amendment. The findings were classified as minor.

IV. REQUESTS FOR PROGRAMMATIC EXCEPTIONS

A. Vet Med Park Aviary (SEBHC)

1. The committee reviewed the request for exception from the prohibition of housing of multiple species in the same area/room.
 - a) Multiple bird species may be housed in the same room or area, and birds may be housed in the same room or area as tortoises.

B. Wildlife & Exotic Animal Center (WEAC)*

1. The committee reviewed the request for exception from feed/bedding storage standards.
 - a) The storage area is a large metal silo which may internally exceed 70 degrees.
 - b) It was noted that feed is not stored for long periods (~2 weeks), and the facility has confirmed with the feed manufacturer that storage above 70 degrees is acceptable.

C. Reproductive Sciences Center on Hwy. 47 (RSC)*

1. The committee reviewed the request for exception from feed/bedding storage standards.
 - a) Feed is stored in a large container with no air conditioning.
 - b) It was noted that the manufacturer has verified that storage above 70 degrees is acceptable.
 - c) The AV recommended that the request include a stipulation that feed stored in this location will be used within 45 days.

D. Approved (by majority vote): As indicated above

V. Semiannual Program Review Assignments

- A. An AWO staff member presented the OLAW checklist to be used by members for the semiannual program review; results to be presented at the meeting in July.
- B. Members volunteered to complete specific sections of the checklist and report their findings at the July 15, 2021 IACUC meeting.

[12:59pm – Member 1067 entered]

VI. MEMBER TRAINING

A. Special Review Considerations: Non-Pharmaceutical Grade Substances

1. The AV discussed the use of Fatal Plus for anesthesia in certain species and the use of non-pharmaceutical-grade substances.
2. Members of the Animal Welfare Office staff provided the IACUC with information related to the review of non-pharmaceutical grade substance use.

VII. OTHER BUSINESS

A. SAPR Location

1. The AWO Director informed members that an in-person location for the July 15th, 2021 IACUC meeting/SAPR is still being considered and indicated she will send out a poll to gauge member interest.

MEETING ADJOURNED at 1:12 pm; quorum was maintained for the entirety of the business portion of the meeting.

TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE
July 15, 2021

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1049, 1076, 1059, 1046, 1052, 1068, 1081(A), 1079, 1084(A), 1039, 1071, 1075, 1051, 1087(A)
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	1040, 1067, 1063, 1082, 1004, 1085, 1011, 1077, 1028, 1066, 1016
ALTERNATE MEMBERS ABSENT:	1062, 1069, 1012, 1083, 1086, 1080, 1072
VISITORS PRESENT:	Associate Vice President for Research, VPR; Associate Vice President/Research Compliance Officer, VPR; Assistant Director, AWO; Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Veterinary Resident, Vet Med Pathobiology

CALL TO ORDER:

- The meeting was formally called to order at 12:33 PM by the Chair. The meeting quorum is 13 members. Fourteen voting members were present when the meeting was called to order.

I. INTRODUCTIONS

- A. The Chair introduced the Associate Vice President for Research. The associate vice president remarked on the success of the IACUC and animal welfare program and the support of the previous and current Vice President for Research.

[12:34pm – Member 1081 entered]

[12:35pm – Member 1039 entered]

II. ANNOUNCEMENTS

- A. The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- B. The Chair asked committee members to make a note in the group chat feed if they need to leave before the meeting concludes in order to keep track of the members present and ensure quorum is maintained.
- C. **Next IACUC meeting**
- The next IACUC meeting will take place at 12:30 PM, August 19th 2021. The meeting will be conducted via Zoom.
- D. **Upcoming Inspections**
- AWO staff will send an email to solicit volunteers for upcoming inspections.
 - Upcoming Inspections
 - ILSB – August 3, 2021.** Two volunteers are needed for this in-person inspection.
 - PSRC – August 4, 2021.** No volunteers are needed for this in-person inspection; additional volunteers are welcome to participate.
 - LARR – August 5, 2021.** Three volunteers are needed for this in-person inspection.

III. Continuing Education Opportunities for IACUC Members

- A. The AWO Director informed members of upcoming training opportunities. Members were reminded to inform the AWO of any training completed.
- OLAW Webinar - IACUC Responsibilities Regarding Service Animals:**
<https://olaw.nih.gov/education/educational-resources/webinar-2021-06-10.htm>
- B. The Chair asked the AWO Director if IACUC members had completed all required trainings. The Director responded that the current training requirements are complete.

IV. OLD BUSINESS

A. Review of Minutes

1. The Committee reviewed the minutes from the June 17, 2021 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. All findings with timelines for correction in June have been addressed.
2. A previously-presented inspection finding was brought to the IACUC's attention, to be discussed with a recent finding (new business).
 - a) An expired antibiotic was noted to have been used in animals at Vet Med Park. The lab was contacted and confirmed that the drug was discarded and no adverse events occurred. The finding was considered corrected with a minor classification.

V. NEW BUSINESS:

A. USDA Inspection*

1. The AV described the results of a recent site inspection from the USDA.

- a) This was an unannounced, routine inspection. The inspector was generally pleased with the animal care observed. At one facility, there was a finding related to feed storage in an outdoor area. An open bag of feed was found not stored in a sealed container. The finding was corrected by the facility to meet the deadline set by the USDA inspector.
- b) Teachable moment 1: The inspector suggested additional pasture management related to the control of large weeds in one of the pastures.
- c) Teachable moment 2: A facility that is used for surgical procedures was also used for sample collection and required further cleaning before meeting the standards for surgical procedures.

[12:46pm – Member 1049 entered]

B. Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. A subcommittee composed of the IACUC inspectors for the recently-inspected facilities have approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction. The resulting inspection findings and outcome were presented for the IACUC's information.
 - a) **MREB* - Conducted June 8, 10, 16 & 23, 2021 (Members 1075, 1078, 1011, 1083, 1049, 1039) – approved fully via all subcommittees July 1, 2021**
 - 1) During this inspection approximately 149 individual locations were inspected and 48 findings noted related to Animal records – daily care and surgery, Cleaning/Environment, EHS – human safety, Expired – cleaning/disinfectant, controlled substances, drugs/substances, instruments/machines, and other, Facility Repair & Function, Improper storage – drugs, Improper/no label, Occ. Health – human safety, Other, Records – Controlled substances and other. A corrective action and timeline for correction was established by the committees involving a variety of actions including: providing confirmation/clarification on items, discarding expired substances, confirming vaporizers would not be used until recertified, placing allergen alert signs, submitting Amendments, and updating/improving records (drug and surgical) among other items. All findings were classified as minor.
 - b) **Miscellaneous Facilities (BCC, HPCT & SPHB) – Conducted June 17, 2021 (Members 1083, 1087) – approved via subcommittee June 25, 2021**
 - 1) During this inspection three individual locations were inspected and no findings were noted.
 - c) **WFES & GGB/HLKN – Conducted June 22, 2021 (Member 1087) – approved via subcommittee June 23, 2021**
 - 1) During this inspection approximately eight individual locations were inspected and no findings were noted.
 - d) **GHRC* – Conducted June 24, 2021 (Member 1039) – approved via subcommittee July 1, 2021**
 - 1) During this inspection approximately 38 individual locations were inspected and no findings were noted.
 - e) **MSRB* – Conducted July 7, 2021 (Members 1066, 1078) – approved via subcommittee July 8, 2021**

- 1) During this inspection approximately 33 individual locations were inspected and no findings were noted.
- f) **VBEC* – Conducted July 8, 2021 (Members 1063) – approved via subcommittee July 8, 2021**
 - 1) During this inspection approximately 40 individual locations were inspected and 7 findings noted related to Cleaning/Environment, Expired – drugs/substances, Facility Repair & Function, and Occ. Health – human safety. A corrective action and timeline for correction was established by the committee including: ensuring an allergen alert sign is posted, confirming work orders have been submitted, and confirming other actions. All findings were classified as minor.
 - g) An extension for the July timelines for correction to August 19th, 2021 was recommended.
 - h) A member asked AWO staff for more information related to the posting of animal allergens warning signs in areas with animal activity.
 - i) **Approved as revised (by majority vote): as indicated above.**
2. AWO staff asked for the attention of the IACUC to a finding related to the use of expired euthanasia solution. In addressing the IACUC inspection finding, the PI has stated that no adverse events occurred related to the use of the expired compound. The IACUC was asked to examine the classification of this deficiency and the previously-discussed deficiency related to the use of expired antibiotics.
 - a) The committee discussed the lack of negative outcomes associated with this use.
 - b) A member explained that there is a nationwide shortage in euthanasia solutions at this time.
 - c) A member asked if the study was NIH-funded. AWO staff stated that it was not, but the study which used expired antibiotics was funded by the Department of Defense (DoD).
 - d) A member voiced the opinion that the deficiency related to the use of expired euthanasia solution should be considered minor because there were no associated adverse events and the use was unintentional and not egregious.
 - e) The committee discussed how expiration dates are issued for drugs, and the potential quality of drugs after a manufacturer's expiration date.
 - f) A member asked if information from these inspection findings will be provided upon the next inspection at this location. AWO staff answered that it would.
 - g) **Approved (by majority vote): finding classification as minor.**
3. AWO staff asked for the attention of the IACUC to a previously discussed finding concerning the use of expired antibiotics. The use of expired antibiotics was discussed and the IACUC was asked to classify this deficiency as minor or significant.
 - a) A member asked whether the PI or lab personnel have developed a system to prevent the use of expired materials. AWO staff is not aware of a new system being implemented.
 - b) A member asked if the DoD needs to be notified in relation to the incident. AWO staff explained that the DoD needs to be notified for adverse events, significant deficiencies, noncompliance, or protocol suspension, but this finding does not fall within those categories as currently classified.
 - c) A member stated that they would like a plan or system to be put in place to prevent the use of expired materials. This was described as a suggested corrective action.
 - d) The Chair stated that the deficiency would be reviewed by subcommittee and the subcommittee review would be presented at a future meeting.

II. REQUESTS FOR PROGRAMMATIC EXCEPTIONS

A. Building 997, Tick Research Lab at Vet Med Park

1. The committee reviewed the request for exception from feed/bedding storage standards.
 - a) The building containing the storage area was constructed in the 1980s and was designed to permit feed delivery via access from the outside. The storage area temperature can exceed 70 degrees F and the humidity can exceed 70%.
 - b) It was noted that a dehumidifier has been placed in the area to lower the relative humidity and the temperature has not reached above 80 degrees F during monitoring.
 - c) It was also noted that feed is not typically stored in this location for longer than 3 weeks.
 - d) A member asked if requests for programmatic exceptions have expiration dates. The AWO Director replied that the exceptions can have expiration dates if the IACUC decides.

- e) A member asked if this feed could be stored in a more climate-controlled location. AWO staff explained that this storage is specific to the Tick Research Lab, so storage elsewhere would be a burden on the researchers. It was also noted that this facility is not managed by Vet Med Park personnel.

2. Approved (by majority vote): As written

B. Vet Med Park*

- 1. The committee reviewed the request for exception from feed/bedding storage standards.
 - a) Feed is stored in three large silos with no air conditioning and in rooms with air conditioning but inadequate insulation.
 - b) It was noted that the USDA inspector was satisfied with the length of feed storage in this location.
 - c) It was noted that the manufacturer has verified that feed storage above 70 degrees is acceptable.
 - d) A member explained that AAALAC inspectors require exceptions to be reviewed and approved by the IACUC.

2. Approved (by majority vote): As written

C. PI Request – Exemption from IACUC Guidance TAMU-G-003

- 1. The committee reviewed a request for a limited exemption from the requirement that isoflurane vaporizers must have calibration verification performed at least every two years.
 - a) The most recent calibration verification for the instrument expired in April 2021.
 - b) The PI is actively working to arrange calibration verification of the vaporizer; however, the machine is needed for experimental purposes in the next 7-10 days.
 - c) A member asked if the machine has recently been used. AWO staff explained that it was not clear if the machine was used recently or if it had been used after the calibration verification expiration date.
 - d) A member asked if another machine could be used or borrowed. AWO staff explained that no other appropriate machine was available, as this unit is intended for use on guinea pigs under BSL3 conditions.
 - e) A member expressed concerns that denial of the request would lead to the use of additional animals, as current animals would age out of the experimental timeline.
 - f) AWO staff mentioned that the planned procedure involves anesthesia for inoculations and not surgery.
 - g) The AV said that the maintenance of anesthesia delivery and effects is the responsibility of the person performing the anesthetic monitoring.
 - h) A member asked for the time period for the exemption. August 19, 2021 was suggested and generally agreed.
- 2. **Approved (by majority vote):**
 - a) Exception to isoflurane vaporizer calibration verification as per IACUC guidance for a single vaporizer
 - b) Exception to expire August 19, 2019

III. Semiannual Program Review

A. Outstanding items from the January 2021 SAPR

- 1. The AWO Director presented an update to a deficiency from the January SAPR.
- 2. **Item 3: Physical Restraint**
 - a) CA2: Complete the review and approval of a guidance document regarding the use of physical restraint by July 31, 2021.
 - b) The Guidance document TAMU-G-051 related to the use of physical restraint was approved March 1, 2021.
- 3. **Approved (by majority vote):**
 - a) Closed item 3 as completed.

B. Programmatic Review Checklist

- 1. Members presented their evaluations of specific portions of the checklist. The Chair reminded members to limit their comments to those pertaining to findings or those items which require discussion.
 - a) Section I.A.1: Animal Care and Use Program – all items received evaluations of Acceptable.
 - b) Section I.A.2: Disaster Planning and Emergency Preparedness – all items received evaluations of Acceptable.
 - 1) The member performing the review commented that the AV and the Comparative Medicine Program should be commended on their actions during the Winter 2021 severe weather event.

- c) Section I.A.3: IACUC - All items received evaluations of Acceptable.
- d) Section I.A.4: IACUC Protocol Review – Special Considerations – all items received evaluations of Acceptable.
 - 1) The member performing the review asked if guidance documents have been approved related to food and/or water restriction. The AWO Director explained that the IACUC has not yet approved a guidance related to food and/or water restriction but the protocol form was updated in November 2019 to ask for details related to food and/or water restriction (such as weekly body weight records and daily written records).
- e) Section I.A.5: IACUC Membership and Functions - all items received evaluations of Acceptable.
 - 1) The member performing the review indicated that the online submission form was not submitting information to the AWO. Upon investigation, it was found that a setting had been changed which prevented the sending of information from the form to the AWO. The settings was changed and the form now functions correctly.
 - 2) The IACUC agreed that the item was corrected and may be called Acceptable.
- f) Section I.A.6: IACUC Training - all items received evaluations of Acceptable.
- g) Section I.A.7: IACUC Records and Reporting Requirements - all items received evaluations of Acceptable.
- h) Section I.A.8: Veterinary Care - all items received evaluations of Acceptable.
- i) Section I.A.9: Personnel Qualifications and Training - all items received evaluations of Acceptable.
- j) Section I.A.10: Occupational Health and Safety of Personnel - all items received evaluations of Acceptable.
- k) Section I.A.11: Personnel Security - all items received evaluations of Acceptable.
- l) Section I.A.12: Investigating & Reporting Animal Welfare Concerns - all items received evaluations of Acceptable.
- m) Section I.B.1: Clinical Care and Management - all items received evaluations of Acceptable.
- n) Section I.B.2: Animal Procurement and Transportation/Preventative Medicine - all items received evaluations of Acceptable.
- o) Section I.B.3: Surgery - all items received evaluations of Acceptable.
- p) Section I.B.4: Pain, Distress, Anesthesia, and Analgesia - all items received evaluations of Acceptable.
 - 1) The member performing the evaluation commented that the paralytics guideline expires in September and will need to be revisited. The AWO Director commented that the paralytics guidelines, TAMU-G-011, is currently under IACUC review via email; members were encouraged to look over the guideline and submit revisions as needed.
- q) Section I.B.5: Euthanasia - all items received evaluations of Acceptable.
 - 1) The member performing the evaluation commented that AAALAC wants implementation of the AVMA 2020 guidelines by September 2021. It was noted by AWO staff that the IACUC inspection teams are confirming the new guidelines for CO2 are posted and implemented.
- r) Section I.B.6: Drug Storage and Control - all items received evaluations of Acceptable.

2. **Approved (by majority vote):** as indicated above.

[2:00pm – The Chair declared a break until 2:12pm]

C. Departures and Exceptions Checklist

- 1. A member of the AWO staff presented a list of Departures from the Guide and Exceptions from the AWR approved by the IACUC for use in animals since the last SAPR.

[2:25pm – Member 1079 exited]

D. Programmatic Changes Approved Since Last SAPR

- 1. A member of the AWO staff presented a list of programmatic changes implemented since the last SAPR. These changes have included changes in membership, PAM staff prioritization of visits to PIs engaging in rodent surgeries, potential approval of inspection findings by subcommittee, and the approval of several IACUC guidance and SOP documents.

E. Program Metrics

- 1. An AWO staff member presented the program metrics for the previous 6 months and submission metrics from the three previous SAPRs. It was noted that protocol review time has increased.

2. An AWO staff member presented the program metrics related to IACUC inspections findings. Inspections have fully resumed. 90% of locations had no findings. 100% of findings were classified as minor, with four repeat findings. The most common corrective action was related to facility repair and function.
3. An AWO staff member presented the program metrics related to reportable events. In the past 6 months, the program has had eight adverse events, zero animal concerns, and one noncompliance event.
 - a) The AWO Director mentioned that the noncompliance event noted has not been voted on by the IACUC and so should not yet be considered a noncompliance event.
 - b) The Chair asked for clarification on the number of deficiencies by location vs. the percent of overall deficiencies by location.
4. AWO staff members presented metrics related to the PAM program. Current PAM metrics were compared with previous SAPR PAM data. The most common PAM event was outreach. The most common outcome for PAM audits is SFIs related to the approved AUP. 14% of visits (11 out of 77) had findings. The most common findings were in the category of procedures, and the most common corrective actions recommended were VVCs. 70% of visits result in at least one SFI.

MEETING ADJOURNED at 2:45 pm; quorum was maintained for the entirety of the meeting.

**TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE**

**August 19, 2021
MINUTES**

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1049, 1076, 1067, 1059, 1046, 1052, 1082, 1085, 1039, 1011, 1077, 1080 (A), 1028, 1051, 1016, 1087(A)
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	1053, 1040, 1068, 1079, 1063, 1071, 1075, 1066,
ALTERNATE MEMBERS ABSENT:	1062, 1084, 1004, 1069, 1012, 1083, 1086, 1072
VISITORS PRESENT:	Assistant Director, AWO; Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Veterinary Resident, Vet Med Pathobiology; Compliance Officer I, Texas A&M AgriLife Research; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research; Professor, Medical Physiology; Postdoctoral Research Associate, Medical Physiology

CALL TO ORDER:

- The meeting was formally called to order at 12:30 PM by the Chair. The meeting quorum is 13 members. Fourteen voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- The Chair asked committee members to make a note in the group chat feed if they need to leave before the meeting concludes in order to keep track of the members present and ensure quorum is maintained.

[12:31pm – Members 1059 and 1051 entered]

C. Next IACUC meeting

- The next IACUC meeting will take place at 12:30 PM, September 16th 2021. The meeting will be conducted via Zoom.

[12:32pm – Member 1067 entered]

D. Loss of Member

- The committee was notified that a scientific alternate member (1081) passed away. The Chair described the member's contributions to the IACUC, expressed sorrow, and said that the member will be missed.

E. Upcoming Inspections

- AWO staff will send an email to solicit volunteers for upcoming inspections.
- Upcoming Inspections
 - PSYC – September 8, 2021.** One volunteer is needed for this in-person inspection.
 - KLCT/CMAT – September 9, 2021.** No volunteers are needed for this in-person inspection; additional volunteers are welcome to participate.
 - TAMUG – TBD.** One volunteer is needed for this virtual inspection.

[12:34pm – Member 1052 entered]

II. OLD BUSINESS

A. Review of Minutes

- The Committee reviewed the minutes from the July 15, 2021 IACUC meeting.
- Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

- All inspection deficiencies with timetables for correction in July and August have been corrected

2. At a previous meeting, the IACUC approved a limited programmatic exception request for the use of a vaporizer that had not been recertified within the required time limit (2021-008-E). The vaporizer in question was recertified 7/15/2021 and the exception request has expired.

III. NEW BUSINESS:

A. SAPR Report to the IO

1. The committee reviewed the SAPR report to the IO for the semiannual program review conducted in January. The updated inspection details list was presented to the committee for review. All findings with timetables for correction since the last SAPR have been corrected. A member of the AWO staff informed the committee that the signature page for the IO report would be distributed for signatures via DocuSign.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. A subcommittee composed of the IACUC inspectors for the recently-inspected facilities have approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction. All inspection results were presented for the IACUC's information only, with the exception of BSBE/BTLR which required a vote.
 - a) **BSBE & BTLR - Conducted July 8, 2021 (Member 1059) – vote required**
 - 1) During this inspection approximately 15 individual locations were inspected and one finding noted related to Occ. Health – human safety. A corrective action and timeline for correction was established by the committee involving confirming individuals are enrolled in BOHP. The finding was classified as minor.
 - 2) **Approved as written (by majority vote): as indicated above.**
 - b) **BSBW – Conducted July 8, 2021 (Member 1039) – approved via subcommittee August 17, 2021**
 - 1) During this inspection 22 individual locations were inspected and no findings were noted.
 - c) **ILSB* – Conducted August 3, 2021 (Members 1083, 1039, 1087) – approved via subcommittee August 18, 2021**
 - 1) During this inspection approximately 56 individual locations were inspected and 15 findings noted related to Animal records – surgery, Cleaning/Environment, Expired – cleaning/disinfectant, drugs/substances, Improper storage – other, Improper/no label, Records – Controlled substances, Records – Other and Training. A corrective action and timeline for correction was established for all findings involving obtaining training, updating records, discarding expired materials, updating labels, and reviewing IACUC Guidance documents among other actions. All findings were classified as minor.
 - d) **PSRC – Conducted August 4, 2021 (Member 1075) – approved via subcommittee August 5, 2021**
 - 1) During this inspection approximately 23 individual locations were inspected and two findings were noted in EHS – human safety and Emergency Response. A corrective action and timeline for correction was established for both findings involving updating emergency contact information and testing an eyewash station. Both findings were classified as minor.
 - e) **LARR* – Conducted August 5, 2021 (Members 1046, 1068, 1051) – approved via subcommittee August 17, 2021**
 - 1) During this inspection approximately 130 individual locations were inspected and 33 findings were noted in Animal records – daily care, Cleaning/Environment, Expired – cleaning/disinfectant, drugs/substances, feed, instruments/machines, medical supplies & other, Eyewash, Facility Repair & Function, Improper storage – drugs, food/water, Improper/no label, Other, and Records – other. A corrective action and timeline for correction was established for all findings involving discarding expired materials, providing clarification and/or confirmation on items or actions, updating labels and records, submitting Amendments, and contacting the AWO among other actions. All findings were classified as minor.

C. AUP Submission

1. The chair reminded IACUC members that any protocol or amendment can be called for full committee review by any member.

2. IACUC 2021-0221*

- a) The protocol was called for full committee review by an IACUC member.
- b) The primary reviewer (PR) presented an overview of the AUP. The PR asked for any committee concerns related to the use of neuromuscular blocking agents.
- c) The AV stated that the lab in question displays technical prowess in their experimental procedures and he has no concerns with the use of neuromuscular blocking agents in this context.
- d) AWO staff shared additional administrative review comments for IACUC consideration:
 - 1) The PI has reported in the past that mortality may occur in experimental animals. This is not currently listed in the clinical signs section of the protocol application as an expected outcome.
 - 2) The agents of euthanasia are not currently listed in the drug table. The agents should be listed and the questions regarding the use of non-pharmaceutical grade substances will need to be completed at that time.
 - 3) Currently, additional post-operative analgesia is listed “as needed”. Suggest requesting more specific criteria for administration.
- e) A member questioned the necessity of listing potential death as an expected outcome. AWO staff clarified that the inclusion of death as an expected outcome prevents the necessity of reporting the death as an unexpected outcome or adverse event. The AV commented that PIs may need encouragement to list death as a potential outcome.
- f) **Requires Modification to Secure Approval, send to DMR:**
 - 1) Add death to the expected potential outcomes
 - 2) List the agents for euthanasia in the drug/agent table
 - 3) Provide information regarding the use of non-pharmaceutical grade substances
 - 4) Provide clarification on criteria for analgesia use

D. Requests for Programmatic Exceptions

1. ABSL3/BSAT locations in Buildings 1197 (VRB)* and 1001 (MREB I/II)*

- a) The committee reviewed the request for exception from the requirement of separate housing areas for different species.
- b) The space allotted for ABSL3/BSAT containment in these buildings is limited. This exception would allow animals with similar pathogen status to be housed together.
- c) A member asked for clarification regarding the limited space, given the large amount of general housing in these buildings. A Biosafety representative clarified that the ABSL3/BSAT locations were specially designated and extremely limited.
- d) **Approved (by majority vote): As written**

[1:17pm – Member 1087 exited]

IV. MEMBER TRAINING

A. Hindlimb Unloading

1. A PI presented information related to the practice of hindlimb unloading as a model for microgravity.

[All non-RCB visitors were asked to exit the meeting]

V. POTENTIAL NONCOMPLIANCE/NONCOMPLIANCE UPDATES

A. 2021-012-NC*

1. An investigative subcommittee appointed by the IACUC Chair performed an investigation into the findings noted during a routine USDA inspection.
 - a) The subcommittee noted that there was an inspection finding documented regarding an open bag of feed in an open storage building and two teachable moments – one regarding a surgical space at the facility and one regarding the pasture in an animal housing location.
 - b) The subcommittee noted that the facility addressed the finding and teachable moments immediately after the USDA visit.

[1:33pm – members 1080 and 1074 recusal]

2. Two members recused themselves due to conflict of interest for the deliberation and IACUC vote.

- a) The subcommittee suggested the IACUC accept all corrective actions completed by the facility and request confirmation from the facility that the appropriate IACUC guidance related to feed storage is reviewed and a pasture maintenance schedule has been established. Additionally, they recommended the USDA inspection finding be categorized as a Finding with Noncompliance and the teachable moments as Findings without Noncompliance.
3. The IACUC determined that this report will be reviewed at an upcoming meeting of the IACUC for final review and closure.
4. **Approved as revised (by majority vote):**
 - a) Categorization of issues – USDA Finding: Findings with Noncompliance, USDA Teachable Moments: Findings without Noncompliance
 - b) Accept subcommittee’s recommendations for facility as outlined above
 - c) Final review and closure of report to occur by FCR

[1:36pm – Member 1074 re-entered and member 1011 exited]

B. 2021-013-NC*

1. An investigative subcommittee appointed by the IACUC Chair performed an investigation into a finding noted during a Semiannual facility inspection.
 - a) The subcommittee noted that during a semiannual facility inspection expired antibiotic was noted as being used in live animals. Lab staff confirmed no adverse events occurred due to its use and it was confirmed to be discarded. The use of the expired antibiotic was inadvertent.
 - b) The subcommittee recommended the findings be categorized as Findings without Noncompliance, and suggested corrective actions for the IACUC. These include: having the PI submit a plan of action to ensure reoccurrence does not occur, having the PI/lab staff review IACUC guidance documents, accept the classification of the deficiency on the semiannual facility inspection report as “Minor”, and confirm that no external reporting obligations are necessary.
2. The IACUC discussed that this report will be reviewed by the subcommittee upon its return from the facility for final review and closure.
3. **Approved as revised (by majority vote):**
 - a) Categorization of issue – Findings without Noncompliance
 - b) Accept subcommittee’s recommendations for PI as outlined above
 - c) Final review and closure of this report will be conducted by the subcommittee (will not return to FCR)

MEETING ADJOURNED at 1:46 pm; quorum was maintained for the entirety of the meeting.

**TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE**

**September 16, 2021
MINUTES**

VOTING MEMBERS PRESENT:	1040, 1049, 1076, 1046, 1052, 1068, 1079, 1063, 1082, 1004, 1085, 1089, 1039, 1071, 1075, 1011, 1077, 1080(A), 1028, 1066, 1051
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1067, 1016
ALTERNATE MEMBERS ABSENT:	1062, 1084, 1069, 1012, 1086, 1087
VISITORS PRESENT:	Assistant Director, AWO; Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research; Compliance Officer I, Texas A&M AgriLife Research; Risk and Compliance Coordinator, Texas A&M AgriLife Research; Clinical Veterinarian, Comparative Medicine Program; Associate Biological Safety Officer and Responsible Official, Biosafety; Animal Welfare Information Center Coordinator, USDA National Agricultural Library Animal Welfare Information Center (AWIC) Coordinator

CALL TO ORDER:

- The meeting was formally called to order at 12:30 PM by the Vice Chair. The meeting quorum is 13 members. Thirteen voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- A.** The Vice Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.

[12:31pm – Members 1076, 1052, 1077, and 1089 entered]

- B.** The Chair asked committee members to make a note in the group chat feed if they need to leave before the meeting concludes in order to keep track of the members present and ensure quorum is maintained.

C. New IACUC Members

- The Vice Chair informed members of the addition of 5 new IACUC members (1 scientific, 2 scientific alternates, 1 veterinarian and 1 non-scientist alternate).

[12:32pm – Member 1082 entered]

D. Next IACUC meeting

- The next IACUC meeting will take place at 12:30 PM, October 21st 2021. The meeting will be conducted via Zoom.

[12:33pm – Member 1080 entered]

E. Upcoming Inspections

- AWO staff will send an email to solicit volunteers for upcoming inspections.
- Upcoming Inspections; additional volunteers are welcome to participate
 - CVM labs/classrooms – October 5, 2021.** One volunteer is needed for this virtual inspection.
 - Schubot Aviary – October 6, 2021.** No volunteers are needed for this in-person inspection.
 - Aquaculture – October 7, 2021.** No volunteers are needed for this in-person inspection.
 - ASTREC – October 12, 2021.** Two volunteers are needed for this in-person inspection.
 - WEAC – October 13, 2021.** One volunteer is needed for this in-person inspection.
 - Horse Units I – October 14, 2021.** One volunteer is needed for this in-person inspection.
 - Horse Units II – October 14, 2021.** One volunteer is needed for this in-person inspection.
 - TIPS – October 19, 2021.** One volunteer is needed for this in-person inspection.
 - VMP – October 20, 2021.** Two volunteers are needed for this in-person inspection.

- j) **RELLIS/RSC/CVM-L Pastures – October 21, 2021.** One volunteer is needed for this in-person inspection.
- k) **CVM – LA – October 26, 2021.** Two volunteers are needed for this in-person inspection.
- l) **CVM – SA – October 27, 2021.** One volunteer is needed for this in-person inspection.
- m) **ABSL3 – October 28, 2021.** No volunteers are needed for this in-person inspection.

F. Continuing Education Opportunities for IACUC Members

1. The AWO Director informed members of upcoming training opportunities. Members were reminded to inform the AWO of any training completed.
 - a) CITI: IACUC Protocol Review; <https://www.citiprogram.org/>
 - 1) New CITI course for both new and experienced IACUC members that expands on the *Essentials for IACUC Members* course.
 - 2) Members interested in this course were encouraged to contact the AWO for guidance in adding the course to their CITI account and reconciling course details with regulatory guidelines.
 - b) PRIM&R: Animal Research Oversight Course (AROC)
 - 1) On-demand and interactive course for new and experienced IACUC members and staff.
 - 2) Members were asked to inform the AWO if they have a PRIM&R account; otherwise, the AWO will establish a training account for members.

II. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the August 19, 2021 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

[12:38pm – Member 1040 entered]

B. Update on Semiannual Facility Inspection Deficiencies

1. The majority of findings with timelines for correction in September have been addressed, but several items require clarifications and/or extensions to timetables for correction.
 - a) ILSB: Timetable for correction related to creation of a cleaning SOP was September 16, 2021. The PI has been in contact with the AWO and is in the process of working on this AUP, but it has not been finalized. Request timeline for correction extension to October 21, 2021.
 - b) LARR*: All of the following findings had timetables for correction of September 16, 2021.
 - 1) An extension of this timeline to October 21, 2021 is requested for the following findings:
 - (a) Creation of a cleaning SOP for behavioral equipment – PI has been in contact with AWO and is actively working on it.
 - (b) Discarding expired needles from PI supplies – the AWO has not received a response from the PI at this time and will continue to follow up.
 - (c) Two amendments request justifying single housing are in the process, but have not yet been submitted in iRIS.
 - (d) Corrective actions for findings related to facility/CMP program have not yet been submitted, but facility personnel have indicated they are actively working on them.
 - (e) PIs associated with rooms marked “DNE” (do not enter) at time of inspection have been contacted and are in the process of rescheduling inspections.
 - 2) AWO staff requested clarification from the IACUC regarding the following:
 - (a) Several findings involving containers of substances with unclear labels (generally no expiration date) had been addressed by lab personnel with the corrective action of discarding all substances.
 - (b) The IACUC discussed that discarding the substances was acceptable; no additional clarification required.
 - (c) One member requested AWO staff send the lab TAMU-G-010 as a reminder for how to label drugs/compounds.
2. **Approved (by majority vote):**
 - a) Extension of timetable for correction to October 21, 2021 as outlined above
 - b) Accept findings with timetable of correction of September 16, 2021 with request for clarification as acceptable as indicated above.

III. NEW BUSINESS I:

A. Ad-hoc Reviewer Approval*

1. AWO post-approval monitoring staff submitted a request for IACUC approval to act as ad-hoc inspectors of a vehicle which will be used to transport animals to a PI's lab.
2. **Approved (by majority vote)**
 - a) AWO post-approval monitoring staff to act as ad-hoc inspectors for PI transport vehicle

IV. PROTOCOL SUBMISSION RETURNING TO FULL COMMITTEE REVIEW

A. AUP Submission

1. The Vice Chair reminded IACUC members that any protocol or amendment can be called for full committee review by any member.
2. **IACUC 2021-0003***
 - a) The protocol was called for full committee review by an IACUC member.
 - b) An IACUC member presented an overview of the AUP and revisions made after the last full committee review. The member expressed concern regarding the use of animals for a study which has not established a quantifiable, reproducible methodology to produce experimental results.
 - c) A member asked if the PI could attend the next IACUC meeting so that concerns could be adequately expressed. AWO staff explained that the PI was invited to the present meeting but did not respond.
 - d) A member asked to what extent the PI addressed previous concerns. The presenting member explained that previous concerns were partially addressed but concerns remain.
 - e) A member expressed concerns about the study and its lack of review from an independent scientific review board.

[12:47pm – Member 1063 entered]

- f) The presenting member asked the AWO Director to explain the regulations of USDA oversight regarding the time period of animal possession indicated within the submission.
- g) **Withhold Approval (by majority vote):**
 - 1) Approval withheld until such time as the PI can develop a cogent and well referenced scientific plan which supports the animal activities described in the AUP

V. NEW BUSINESS II:

A. Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. A subcommittee composed of the IACUC inspectors for the recently-inspected facilities have approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction. All inspection results were presented for the IACUC's information only.
 - a) **PSYC - Conducted September 8, 2021 (Members 1039 & 1085) – approved via subcommittee September 14, 2021**
 - 1) During this inspection approximately 36 individual locations were inspected and nine findings were noted related to Cleaning/Environment, EHS – human safety, Expired – controlled substances, drugs/substances, medical supplies, Eyewash, and Records – Controlled substances. A corrective action and timeline for correction was established by the committee involving reviewing TAMU Guidance documents, confirming work orders submitted, confirming expired substances discarded, and storing cleaning supplies off the floor. The findings were classified as minor.
 - b) **CMAT & KLCT – Conducted September 9, 2021 (Member 1075) – approved via subcommittee September 14, 2021**
 - 1) During this inspection 10 individual locations were inspected and five findings were noted related to Animal records – daily care, Expired – drugs/substances, Improper use, Improper storage – other, and Records – Other. A corrective action and timeline for correction was established by the committee involving reviewing TAMU Guidance & Help documents, and providing plans for future work.
 - c) **Galveston – rescheduled due to weather event**

[All non-RCB visitors were asked to exit the meeting]

VI. POTENTIAL NONCOMPLIANCE/NONCOMPLIANCE UPDATES

A. 2021-012-NC*

1. A member recused themselves due to conflict of interest for the deliberation and IACUC vote.

[1:03pm – member 1080 exited (recusal)]

2. The IACUC previously accepted the corrective actions reported as complete, and requested confirmation that actions pertaining to the findings and teachable moments have been completed. It was confirmed that:
 - a) Lab facility personnel have reviewed the applicable guidance document.
 - b) The animal pasture in question has been mowed and a mowing schedule implemented.
 - c) The surgical area has been cleaned.
3. The subcommittee recommended that the report be closed.
4. **Approved (by majority vote)**
 - a) Acceptance of corrective actions and closure of the noncompliance report

B. 2021-013-NC*

1. The IACUC was informed that the investigative subcommittee appointed by the IACUC Chair has reviewed and closed the report as directed by the IACUC.

[1:15pm – member 1051 exited]

[All non-RCB visitors were invited to return to the meeting]

VII. MEMBER TRAINING

A. Alternatives Literature Search

1. A representative of the USDA National Agricultural Library Animal Welfare Information Center (AWIC) presented information related to IACUC review of the alternatives literature search as a portion of the animal use protocol.

[1:22pm – member 1080 re-entered (recusal)]

[1:25pm – member 1004 exited]

MEETING ADJOURNED at 1:41 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

October 21, 2021
MINUTES

VOTING MEMBERS PRESENT:	Dr. Robert Rose (AV), 1053, 1040, 1091, 1076, 1067, 1059, 1046, 1052, 1068, 1079, 1082, 1085, 1089, 1039, 1071, 1075, 1069(A), 1077, 1080(A), 1028, 1066, 1051, 1016, 1087(A)
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	Dr. Mark Westhusin (Chair), 1049, 1063, 1004, 1011
ALTERNATE MEMBERS ABSENT:	1092, 1062, 1088, 1084, 1012, 1086, 1090
VISITORS PRESENT:	Assistant Director, AWO; Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Compliance Officer I, Texas A&M AgriLife Research; Risk and Compliance Coordinator, Texas A&M AgriLife Research; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research; Sea Life Facility Manager, Texas A&M University at Galveston; Assistant Professor, Department of Marine Biology

CALL TO ORDER:

- The Meeting was formally called to order at 12:29 PM by the Vice Chair. The meeting quorum is 14 members. Nineteen voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- The Vice Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- The Vice Chair asked committee members to make a note in the group chat feed if they need to leave before the meeting concludes in order to keep track of the members present and ensure quorum is maintained.

[12:30pm – Member 1077 entered]

C. New IACUC Members

- The Vice Chair introduced a newly appointed scientific IACUC member and an alternate scientific IACUC member (members 1093 and 1094).

[12:31pm – Members 1076 and 1039 entered]

D. Next IACUC meeting

- The next IACUC meeting will take place at 12:30 PM, November 18th, 2021. The meeting will be conducted via Zoom.

E. Upcoming Inspections

- AWO staff will send an email to solicit volunteers for upcoming inspections.
- Upcoming Inspections; additional volunteers are welcome to participate
 - TIGM – November 9, 2021.** Two volunteers are needed for this in-person inspection.
 - Reynolds vivarium – November 10, 2021.** One volunteer is needed for this in-person inspection.
 - Reynolds labs – November 11, 2021.** One volunteer is needed for this in-person inspection.

F. AAALAC Adoption of 2020 Ag Guide

- The AWO Director informed members of updates and resources related to the AAALAC adoption of the 2020 Guide for the Care and Use of Agricultural Animals in Research and Teaching (the Ag Guide).
- AAALAC position statement concerning the 2020 Ag Guide:
 - AAALAC has adopted the 4th edition of the Ag Guide, published in 2020, with clarifications related to the composition of the IACUC and the use of professional judgement, applicability of the AWR, veterinary care and the role of the AV, reference materials from the AVMA on humane slaughter and depopulation, and waterfowl housing.

- b) <https://www.aaalac.org/pub/?id=E900BDB6-CCCF-AB13-89B6-DA98A4B52218>
- 3. New 2020 Ag Guide-related FAQs:
 - a) AAALAC has added several FAQs related to the adoption of the new Ag Guide related to poultry caging, swine housing systems, dairy calf housing and social enrichment [see first link] and HVAC measurements in agricultural settings [second link].
 - b) <https://www.aaalac.org/accreditation-program/faqs/#PoultryCaging>
 - c) <https://www.aaalac.org/accreditation-program/faqs/#HVACagSettings>
- 4. Fall 2021 AAALAC Ag update:
 - a) Update includes information related to high-containment agricultural research.
 - b) <https://www.aaalac.org/pub/?id=7C988221-0D1E-49EF-035D-6254BEE27E5B>

[12:36pm – Member 1080 entered]

G. Continuing Education Opportunities for IACUC Members

- 1. The AWO Director informed members of upcoming training opportunities. Members were reminded to inform the AWO of any training completed.
 - a) PRIM&R Webinar: *More Meaningful Metrics to Assess Animal Program Quality and Effectiveness: A Review and Extension*; November 9, 2021, 12:00-1:15 PM CT. Members interested in the course were encouraged to contact the AWO by Friday Oct. 29 to register.
 - b) SCaw Annual Winter Conference – Virtual, December 6-7, 2021,
 - 1) <https://www.scaw.com/annual-winter-conference.html>
 - 2) Members were encouraged to register themselves for this conference; registration must be made under Texas A&M University. Members were reminded to let the AWO know if they participated in the conference so that continuing education can be documented.

II. OLD BUSINESS:

A. Review of Minutes

- 1. The Committee reviewed the minutes from the September 16, 2021 IACUC meeting.
- 2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

- 1. The majority of findings with timelines for correction before this meeting have been addressed, but several items require extensions of timetables for correction. An extension of this timeline to November 18, 2021 is requested for the following findings:
 - a) PSYC – All of the following findings had timetables for correction of October 21, 2021.
 - 1) Confirming lab cleaning SOPs of behavior equipment are in-place and personnel have reviewed TAMU-G-026. PIs are in the process of doing this and working with CMP for validation of cleaning methods; additional time has been requested to complete.
 - 2) Confirming expired materials have been discarded (two separate findings). AWO staff had not yet had a response from the PI as of the timetable for correction date.
 - 3) Storage of cleaning implements on the floor. AWO staff had not yet had a response from the PI as of the timetable for correction date.
 - b) CMAT – All of the following findings had timetables for correction of October 21, 2021.
 - 1) Confirming all participants are aware of how to access AUPs in iRIS. AWO staff had not yet had a response from the PI as of the timetable for correction date.
 - 2) Animal carcasses being stored in the same freezer as special diets. AWO staff had not yet had a response from the PI as of the timetable for correction date.
 - c) **Approved (by majority vote):** extension of timetable for correction to November 18, 2021 for all findings as outlined above

[12:40pm – Member 1082 entered]

III. NEW BUSINESS:

A. Facility Inspection Reports

- 1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a

subcommittee composed of the IACUC inspectors for the recently inspected facilities have approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction and those inspection results were presented for the IACUC's information only. For others, the IACUC will need to assign corrective actions, timetables for correction and classifications of the deficiencies if these items were not reviewed/approved via subcommittee prior to the meeting.

a) **LARR Main* (Re-inspection of areas marked "DNE" during August inspection of LARR) – Conducted September 20, 2021 (Member 1078)**

- 1) During this inspection approximately 5 individual locations were inspected, and 6 findings were noted related to Animal records – daily care, Expired – cleaning/disinfectant, drugs/substances, and Medical supplies, Facility Repair & Function, Other, and Records - Other. A corrective action and timeline for correction was established by the committee involving discarding expired materials, submitting a work order (if necessary), providing clarification on use of heating pads and submitting an Amendment, and confirming the use of daily care sheet. All findings were classified as minor.

2) **Approved as written (by majority vote) as indicated above.**

b) **TAMUG – Conducted September 23, 2021 (Members 1039, 1074) - approved via subcommittee September 23, 2021**

- 1) During this inspection approximately 9 individual locations were inspected, and 3 findings were noted related to EHS – human safety, Occ. Health – human safety, and Records – other. A corrective action and timeline for correction was established by the subcommittee – involving adding a location to an AUP, confirming student workers are enrolled in BOHP, and confirming emergency eyewash/showers are tested regularly. All findings were classified as minor.

c) **CVM-S-Labs – Conducted October 5, 2021 (Members 1077, 1078) - approved via subcommittee October 5, 2021**

- 1) During this inspection approximately 9 individual locations were inspected, and 2 findings were noted related to Expired – controlled substances and Records – other. A corrective action and timeline for correction were established by the committee – involving submitting an Amendment to add a location to an AUP, and accepting a PI's corrective action (label/segregate expired materials at the time of inspection). Both findings were classified as minor.

d) **Aviary – Conducted October 6, 2021 (Members 1066) – all findings approved via subcommittee October 6, 2021 EXCEPT one finding. One finding called to FCR for discussion.**

- 1) During this inspection approximately 21 individual locations were inspected, and 11 findings were noted related to Animal records – daily care, Cleaning/Environment, Expired – drugs/substances, Facility Repair & Function, Improper storage – other, and Other. A corrective action and timetable for correction was established by the subcommittee for all but one finding. The corrective actions included documenting daily care logs, confirming areas are cleaned, submitting an amendment to request an exception to standard housing, storing cleaning implements off the floor, accepting facilities responses at the time of inspection (discarding expired materials, moving carcasses stored near feed), and rescheduling with the AWO for controlled substance inspection. These findings were classified as minor.
- 2) There was one repeat finding on this inspection – inability to view controlled substances at the time of inspection.
- 3) One finding was called to FCR involving use of animals without IACUC approval.
- 4) An IACUC member asked for details regarding the use of animals without AUP approval. AWO staff responded that amphibians were housed in the room and were being used for laboratory classes. The AUP for the class had not been approved by the IACUC.
- 5) An IACUC member asked if the renewal AUP was now approved; AWO staff indicated it was. An IACUC member expressed the need to send a clear message regarding the use of animals outside of AUP approval.
- 6) An IACUC member asked if the previous AUP had expired. AWO staff replied that yes, the previous AUP had expired and the new AUP had not been approved at the time the class was held. AWO staff explained that the finding will also be going through the noncompliance process.
- 7) A member suggested that this be classified as a significant finding. Several members agreed.

- 8) A member mentioned that one corrective action has already occurred, as the AUP was renewed (approved) and indicated that retraining should also occur as part of the noncompliance process.
- 9) A member asked about the responsibility for the labs. AWO staff responded that it was one PI for the room, but two AUPs. One AUP had been used, the other had not. The member asked about the expired AUPs. AWO staff responded that renewals were in the process of review but had not been approved. The member suggested that an emergency approval should have occurred. The AWO explained that an expedited review is a regular occurrence, but in this occasion the need was not brought to AWO attention. A member commented that timely approval is a responsibility of the PI.
- 10) **Approved as revised (by majority vote):** Corrective actions have already been taken as all AUPs have been approved and PI is cooperating in noncompliance investigation; no further corrective actions required for this finding (no timetable for correction needed). Classification of finding as Significant.

[12:47pm – Member 1040 entered]

- e) **ARTF – Conducted October 7, 2021 (Members 1066) – approved via subcommittee October 7, 2021**
 - 1) During this inspection approximately 52 individual locations were inspected and 2 findings were noted related to Expired – feed, and Improper storage – other. A corrective action and timeline for correction was established by the subcommittee – involving confirming expired feed discarded and removing carcasses from freezer where feed is also stored. All findings were classified as minor.
 - 2) During the course of this inspection, it was relayed to the inspection team that SSC no longer oversees repairs at the majority of this facility and all repairs are made by facility personnel.
 - (a) A member asked if this is considered an Agrilife Research site. AWO staff replied that it was. The member asked about the presence of the facilities coordination group. AWO staff replied that to their knowledge, all repairs were performed by PI and research personnel.
 - (b) The EHS representative asked for contact information for further inquiry.
- f) **WEAC* – Conducted October 12, 2021 (Member 1039)**
 - 1) During this inspection approximately 37 individual locations were inspected and 1 finding was noted related to Expired – feed. A corrective action was established by the committee – involving accepting the corrective actions taken by the PI at the time of inspection (discarding expired materials) and considering the finding corrected (no timetable for correction necessary). The finding was classified as minor.
 - 2) **Approved as written (by majority vote) as indicated above.**
- g) **PRPV & MSTC – Conducted October 13, 2021 (Member 1078) - no inspection findings**
 - 1) During this inspection approximately 9 individual locations were inspected, and no findings were noted.
 - 2) Inspectors commended PRPV for their swine enrichment area.
- h) **Horse Units - EQHSA, EQNR, FREE/EQCT, Horse Center (pasture), PMC & Polo Club – Conducted October 14, 2021 (Members 1039 & 1087)**
 - 1) During this inspection approximately 254 individual locations were inspected and one finding was noted related to Primary enclosure. A corrective action was established by the committee involving establishing a plan to ensure non-shaded pens/pastures will be provided with shade and confirming the plan is implemented. A timeline for correction was established by the committee and the finding was classified as minor.
 - 2) **Approved as written (by majority vote) as indicated above.**

B. Cull Animal Accounting

1. The Animal Welfare Director noted that a PI had recently questioned the need for inclusion of cull animals in their animal numbers on the AUP. The AWO Director explained that all animals produced for AUP research must be included on the AUP, regardless of their intended or realized purpose for the research. It was noted that OLAW expects animals produced in breeding colonies to be accounted for in animal numbers.

IV. PROTOCOLS:

- A. The chair reminded IACUC members that any protocol or amendment can be called for full committee review by any member.
- B. **IACUC 2021-0147**

1. The protocol was called for full committee review for committee input regarding a requested exception to an IACUC guidance.
2. The AV presented an overview of the AUP and the requested exception related to lack of asepsis when performing a survival surgery in the field on non-USDA regulated species. It was noted that this procedure has been approved by the IACUC in the past as described in the current AUP submission. The DMR for the protocol asked for an increase in aseptic practices beyond what was proposed by the PI. The AV designee performing the veterinary review (VR) indicated that in an outdoor setting, caps and gowns are not needed and the current proposed level is accepted practice. The DMR disagreed and recommended the AUP for FCR.
3. A member asked for clarification regarding the discrepancies between proposed practices outlined by the DMR and VR. The AV described the surgical procedure, garb worn and the use of sterile instruments. The AV stated that this is a common procedure and when done in this manner, the complication rate is more dependent on whether the animal is fasted before surgery than asepsis. Generally outcomes for this surgery are very successful.
4. A member explained that the current aseptic surgical plan is standard practice for outdoor large animal surgery and expressed acceptance with proposed standards.
5. Another member mentioned that a smock and hair net is not a large requirement, but that it may not have a large impact on asepsis.
6. A member asked if there is a history of negative impacts related to asepsis. A member responded that as long as the animals are fasted and the surgeon is skilled, the surgery is typically successful.
7. A member pointed out that in standing surgery on a large animal, excessive PPE can be a safety concern.
8. **Approved as written (by majority vote)**
 - a) Approval of AUP with exception to standards of aseptic surgery granted

[All non-RCB visitors were asked to exit the meeting]

V. POTENTIAL NON-COMPLIANCE/NON-COMPLIANCE UPDATES

A. 2021-010-NC

1. An investigative subcommittee appointed by the IACUC Chair performed an investigation into Adverse Event reports 2021-008-AE & 2021-009-AE.
 - a) The subcommittee noted that, though the adverse events could have been mitigated through greater consideration of environmental conditions, the handling of the animals was in line with common and established practice and no noncompliance occurred.
 - b) The subcommittee noted that the IO asked for determinations regarding the ownership of the animals and whether institutional agreements adequately addressed ownership and responsibility.
 - c) The subcommittee provided recommendations for corrective actions to prevent future adverse events.
2. **Approved (by majority vote)**
 - a) Categorization: no noncompliance
 - b) Acceptance of subcommittee corrective actions and closure of the noncompliance report

B. Related Adverse Event reports 2021-008-AE and 2021-009-AE

1. AWO staff explained that these reported adverse events precipitated the noncompliance investigation and recommended that, with the closure of the non-compliance, these adverse event reports also be closed.
2. **Approved (by majority vote)**
 - a) Acceptance of corrective actions and closure of the adverse event reports

MEETING ADJOURNED at 1:45 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

November 18, 2021
MINUTES

VOTING MEMBERS PRESENT:	Dr. Robert Rose (AV), 1053, 1092(A), 1049, 1091, 1076, 1067, 1046, 1075, 1052, 1068, 1079, 1082, 1089, 1039, 1071, 1077, 1028, 1066, 1051, 1016
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	Dr. Mark Westhusin (Chair), 1040, 1059, 1063, 1004, 1085, 1011
ALTERNATE MEMBERS ABSENT:	1062, 1088, 1084, 1069, 1012, 1086, 1080, 1090, 1087
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Compliance Officer I, Texas A&M AgriLife Research; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research; Risk and Compliance Coordinator, Texas A&M AgriLife Research; Director, Ethics and Compliance, Texas A&M AgriLife Research; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research; Sea Life Facility Manager, Texas A&M University at Galveston; Assistant Professor, Department of Marine Biology

CALL TO ORDER:

- The Meeting was formally called to order at 12:30 PM by the Vice Chair. The meeting quorum is 14 members. Sixteen voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- The Vice Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- Next IACUC meeting**
 - The next IACUC meeting will take place at 12:30 PM, December 16th, 2021. The meeting will be conducted via Zoom.
- Upcoming Inspections**
 - AWO staff will send an email to solicit volunteers for upcoming inspections.
 - Upcoming Inspections; additional volunteers are welcome to participate
 - MREB - Vivarium – December 7, 2021.** Two volunteers are needed for this in-person inspection.
 - MREB - Labs – December 8, 2021.** Three volunteers are needed for this in-person inspection.
 - Misc. Facilities – December 9, 2021.** One volunteer is needed for this inspection (format TBD).
 - WFES & HLKN – December 15, 2021.** One volunteer is needed for this in-person inspection.
 - GHRC – December 16, 2021.** One volunteer is needed for this in-person inspection.

[12:32pm – Member 1082 entered]

D. Continuing Education Opportunities for IACUC Members

- The AWO Director reminded members of an upcoming training opportunity (free under TAMU's institutional membership). Members were also reminded to inform the AWO of any training completed for documentation of continuing education.
 - SCAW Annual Winter Conference – Virtual, December 6-7, 2021, <https://www.scaw.com/annual-winter-conference.html>

[12:33pm – Members 1053 and 1049 entered]

II. OLD BUSINESS:

A. Review of Minutes

- The Committee reviewed the minutes from the October 21, 2021 IACUC meeting.

2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. The majority of findings with timelines for correction prior to the meeting were addressed; with one item requiring an extension of the timetable for correction. An extension of this timeline to December 16, 2021, is requested for the following finding:
 - a) LARR – The following finding had a timetable for correction of November 18, 2021.
 - 1) Submit an amendment to AUP 2019-0176 to detail post-surgical monitoring support. No amendment has been submitted as of the timetable for correction date.
 - b) **Approved (by majority vote):** Extension of timetable for correction to December 16, 2021, as outlined above.

III. NEW BUSINESS

C. Facility Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facilities have approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction and those inspection results were presented for the IACUC's information only. For others, the IACUC will need to assign corrective actions, timetables for correction and classifications of the deficiencies if these items were not reviewed/approved via subcommittee prior to the meeting.

[12:45pm – Member 1016 entered]

a) ASTREC, PFL & BCS* – Conducted October 12, 2021 (Members 1051, 1075)

- 1) During this inspection approximately 211 individual locations were inspected, and 42 findings were noted related to Animal records – surgery, Cleaning/Environment, EHS – human safety, Expired – Medical Supplies, Facility Repair & Function, Improper storage – food/water, Improper/no label, Other, Primary Enclosure, and Records – Other. A corrective action and timetable for correction was established by the committee for each finding involving confirming work orders are submitted or items/systems repaired/removed as needed, updating labeling on items, ensuring feed containers are cleaned and feed stored correctly, accepting corrective actions previously made, ensuring facilities and items/areas in them are cleaned, confirming necessary records are updated, confirming certain areas will be re-inspected prior to use, stating that a specific facility is no longer approved for surgical procedures or housing of USDA covered species until re-inspection has occurred and requesting one facility to consider an automatic warning system be put in place to monitor temperature. All findings were classified as minor.
 - (a) One of the IACUC inspectors indicated that the IACUC should consider revoking approval for surgery or housing with USDA covered species at Building 4010. During the inspection it was noted that, overall, this facility is dirty, common areas are cluttered, and there is a general lack of upkeep.
 - (b) Additionally, the inspector expressed concern about the absence of central climate control in Building 4026. Climate control is provided by fans. While the Ag guide permits this if appropriate temperature ranges are maintained, the inspector did not believe the room set-up would enable appropriate temperature ranges to be maintained without a centralized system.

2) Approved as written (by majority vote) as indicated above

b) TIPS* – Conducted October 19, 2021 (Members 1052, 1073, 1089) - approved via subcommittee November 3, 2021

- 1) During this inspection approximately 66 individual locations were inspected, and 5 findings were noted related to Expired – cleaning/disinfectant, drugs/substances, and instruments/machines, and Records – other. A corrective action and timetable for correction was established by the subcommittee for each finding including confirming an oversight process is put in place for ensuring AUPs that cover animals housed or utilized in procedures at TIPS have TIPS listed as an approved location, accepting facility corrective actions of discarding expired materials at the time of

inspection, and confirming instruments/machines will be serviced prior to use with live animals. All findings were classified as minor.

- 2) AWO staff noted during the inspection that multiple user groups are utilizing space at TIPS and there was not a central oversight for all the groups in place. Facility management personnel were in attendance during the inspection and indicated they were going to put a plan in place to address this issue.

[12:56pm – Member 1067 entered]

c) **Vet Med Park* – Conducted October 20, 2021 (Members 1039, 1073, 1084)**

- 1) During this inspection approximately 239 individual locations were inspected, and 7 findings were noted related to Animal records – daily care, Cleaning/Environment, Expired – drugs/substances, and Expired – feed. A corrective action and timetable for correction was established by the committee for each finding including confirming a work order is submitted to replace an air filter, implementation of updated husbandry agreements and daily care sheets, requesting clarification on materials in use, confirming an area will be cleaned prior to use, and accepting the facility's action of discarding expired materials at the time of inspection. All findings were classified as minor.
- 2) AWO staff brought one of the findings to the attention of the committee regarding lack of husbandry agreements between Pls utilizing Isolation buildings and VMP staff. The facility Director was present during the inspection and indicated they would be implementing an updated process with Pls.
- 3) **Approved as written (by majority vote) as indicated above**

d) **Riverside/RELLIS, CVM Large Animal Pastures & RSC* – Conducted October 21, 2021 (Member 1004) - approved via subcommittee November 16, 2021**

- 1) During this inspection approximately 8 individual locations were inspected and 1 finding was noted related to Animal records – health. A corrective action and timetable for correction was established by the subcommittee for the finding which included facility confirmation an animal was treated for a minor injury noted during the inspection. The finding was classified as minor.

e) **ABSL3 Lab* – Conducted October 26, 2021 (Member 1039)**

- 1) During this inspection one location was inspected and no findings were noted.
- 2) **Approved as written (by majority vote) as indicated above**

f) **CVM Large Animal Hospital* – Conducted October 26, 2021 (Members 1004, 1051) - approved via subcommittee November 18, 2021**

- 1) During this inspection approximately 176 individual locations were inspected, and 10 findings were noted related to Animal records – daily care, Cleaning/Environment, Expired – drugs/substances, Expired – Medical supplies, Facility Repair & Function, Occ. Health – human safety, and Primary Enclosure. A corrective action and timetable for correction was established by the subcommittee for each finding including AWO staff providing an allergen alert sign, confirming work orders have been submitted, accepting facility's actions of discarding expired substances, providing additional information regarding an AUP number and an animal, confirming animal daily care records were updated appropriately, and confirming an area is cleaned. All findings were classified as minor.

g) **CVM Small Animal Hospital* – Conducted October 27, 2021 (Members 1084, 1087, 1095)**

- 1) During this inspection approximately 45 individual locations were inspected and 1 finding was noted related to Improper/no label. A corrective action and timetable for correction was established by the committee for the finding – to confirm secondary containers are labelled with expiration dates if primary container has one. The finding was classified as minor.
- 2) **Approved as written (by majority vote) as indicated above**

h) **TIGM – Conducted November 9, 2021 (Members 1039, 1078)**

- 1) During this inspection approximately 40 individual locations were inspected, and 5 findings were noted related to Expired – cleaning/disinfectant, Expired – instruments/machines, Facility Repair & function, and Records – Other. A corrective action and timetable for correction was established by the committee for each finding including confirming work orders have been submitted, confirming a hood will be recertified prior to use, accepting the facility's actions of discarding expired materials, and submitting an Amendment to request husbandry exceptions. All findings were classified as minor.

- 2) **Approved as written (by majority vote) as indicated above**
- i) **REYN – Conducted November 10 & 11, 2021 (Members 1040, 1079)**
 - 1) During this inspection approximately 31 individual locations were inspected, and 17 findings were noted related to Animal records – daily care, Aseptic technique, Cleaning/Environment, EHS- human safety, Expired – instruments/machines, Expired – other, Facility Repair & Function, Improper storage – food/water, Improper/no label, and Records – other. A corrective action and timetable for correction was established by the committee for each finding including submitting an Amendment to request “tips only” surgery in rodents, testing/documenting eyewash stations and emergency shower, confirming CO2 signage is current, requiring lab personnel consult with CMP regarding animal housing in satellite areas, confirming a ceiling tile is replaced in its spot and work orders submitted for additional building issues, confirming sterile gloves replaced with in-date supplies, confirming expiration dates are listed on secondary containers, requesting an update from AWO staff on the autoclave system for the building in the future, confirming a room is cleaned/re-inspected prior to use, ensuring feed labeled with type and expiration date and confirming a vaporizer is certified prior to use. All findings were classified as minor.
 - 2) **Approved as written (by majority vote) as indicated above**

D. Animal Concerns

1. 2021-023-AC*

- a) An investigative subcommittee appointed by the IACUC Chair performed an investigation into Animal Concern 2021-023-AC.
- b) The subcommittee noted:
 - 1) No potential non-compliance was identified with the AUP, husbandry or clinical care provided
 - 2) No potential non-compliance with monitoring and recording procedures utilized to evaluate the animals and criteria used to determine when an animal should be removed from the study outlined in the animal use protocol were identified
 - 3) No non-compliance or significant findings were identified during IACUC facility inspections during the timeframe of the animal concern
 - 4) No findings or concerns were identified by the USDA VMO during area and/or focused inspections during the timeframe of the animal concern
- c) **Approved (by majority vote)**
 - 1) Categorization: No findings
 - 2) Acceptance of subcommittee report and closure with no corrective actions

IV. MEMBER TRAINING

A. Humane Endpoints

1. AWO staff presented information related to the selection and review of humane endpoints in animal research.

MEETING ADJOURNED at 1:33 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

December 16, 2021
MINUTES

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1096(A), 1049, 1076, 1067, 1059, 1046, 1052, 1068, 1088(A), 1079, 1082, 1039, 1071, 1075, 1077, 1090(A), 1028, 1066, 1051
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A); 1092(A)
VOTING MEMBERS ABSENT:	1040, 1091, 1063, 1093, 1004, 1085, 1089, 1011, 1016
ALTERNATE MEMBERS ABSENT:	1062, 1095, 1084, 1069, 1012, 1086, 1094, 1080, 1087
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Compliance Officer I, Texas A&M AgriLife Research; Director, Ethics and Compliance, Texas A&M AgriLife Research; Sr. Risk and Compliance Coordinator, Texas A&M AgriLife Research

CALL TO ORDER:

- The Meeting was formally called to order at 12:30 PM by the Chair. The meeting quorum is 15 members. Seventeen voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- Next IACUC meeting**
 - The next IACUC meeting will take place at 12:30 PM, January 20th, 2022. The meeting will be conducted via Zoom. The semiannual program review will also take place at that time.
- Upcoming Inspections**
 - AWO staff will send an email to solicit volunteers for upcoming inspections.
 - Upcoming Inspections; additional volunteers are welcome to participate
 - CMP vehicles – January 11, 2022.** One volunteer is needed for this in-person inspection.
 - GGB (HLKN) – January 11, 2022.** One volunteer is needed for this in-person inspection.
 - MSRB – January 11, 2022.** Two volunteers are needed for this in-person inspection.
 - VBEC – January 12, 2022.** One volunteer is needed for this in-person inspection.
 - BSBW – January 13, 2022.** One volunteer is needed for this in-person inspection.
 - BTLR & BSBE – January 13, 2022.** One volunteer is needed for this in-person inspection.

[12:31pm – Members 1068, 1082, 1090 and 1066 entered]

D. USDA Inspection – Focused

- The AV presented the results of a recent unannounced USDA inspection. No non-compliant items were identified during the focused inspection.

E. New IACUC Members

- The AWO Director introduced a newly appointed alternate scientific IACUC member (member 1096).

F. USDA Regulatory Changes

- The AWO Director presented recent changes to IACUC-related USDA regulations.
- Contingency Plan:** https://www.aphis.usda.gov/aphis/newsroom/stakeholder-info/sa_by_date/sa-2021/sa-12/emergency-contingency-plan-requirements
 - The USDA has lifted the stay on the regulatory requirement for contingency plans effective January 3, 2022. Contingency plans must be in place by July 5, 2022. The program's existing Disaster/Emergency plans may suffice as long as they contain all elements required in the regulation.

- b) Training of personnel in roles and responsibilities as outlined in the Contingency plan must be completed within 60 days of plan implementation. The deadline changes to 30 days for personnel hired more than 30 days after plan implementation.
 - c) Plans must be reviewed by the research facility at least annually, though this requirement can be met by performing a review to coincide with the IACUC's review during the SAPR. Substantive changes must be relayed to staff within 30 days of implementation.
 - d) Contingency plans and documentation of annual review must be available for review by the VMO upon request. The requirement to provide evidence of training was struck from the regulations.
 - e) The AWO has updated the SAPR checklist for use in 2022 to ensure that the IACUC is specifically looking at the requirements from the AWR in addition to the Guide. Because of timing of the SAPR, our current plan may not incorporate everything the USDA is looking for.
 - f) A member asked how the contingency plan would be related to the disaster plan. The AWO Director explained that the verbiage "contingency plan" is specific to the USDA, but the TAMU disaster plan should be sufficient once the new requirements have been incorporated.
3. **Changes to Requirements for Research Facilities to Implement Cures Act:**
<https://www.federalregister.gov/documents/2021/11/24/2021-25614/awa-research-facility-registration-updates-reviews-and-reports>
- a) Changes effective December 27, 2021 to eliminate:
 - 1) annual continuing review and move to a three-year complete review of activities
 - 2) triennial research facility registration
 - 3) inactive status and clarify duration of research facility registration and conditions for termination
 - 4) requirement for CEO or IO to sign Annual Report in paper form (to match electronic submission).
Not in use for TAMU registrations.
 - b) A member asked if another regulatory body would continue to require yearly review of some protocols. The AWO Director explained that the Department of Defense (DoD) also requires annual reviews, however the DoD regulation points to the specific portion of the AWR that is being eliminated. Members were reminded that annual continuing review for protocols with non-USDA regulated species was previously eliminated and has not been required for several years.

[12:34pm – Member 1052 entered]

G. Intrasystem Agreement – AgriLife Research

- 1. The AWO Director stated that the intrasystem agreement with AgriLife Research has been updated and modified to clarify which locations are the responsibility of the TAMU IACUC.
- 2. The Chair indicated that the IO has requested further work on reciprocal agreements between the IACUC and AACUC. The AWO Director acknowledged the email and stated that the work on reciprocal agreements will begin with IACUC leadership.

H. Continuing Education Opportunities for IACUC Members

- 1. The AWO Director informed members of an upcoming training opportunity. Members were encouraged to sign up for this free workshop if interested and to inform the AWO of any training completed for documentation of continuing education.
- a) NAS ILAR workshop, virtual, **February 9-10, 2022:** [Animal Welfare Challenges in Research and Education on Wildlife, Non-Model Animal Species, and Biodiversity](#)

II. OLD BUSINESS:

A. Review of Minutes

- 1. The Committee reviewed the minutes from the November 18, 2021 IACUC meeting.
- 2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

- 1. The majority of findings with timelines for correction prior to the meeting were addressed with one item requiring an extension of the timetable for correction. An extension of this timeline to January 20, 2022 is requested for the following finding:
 - a) LARR – The following finding had a timetable for correction of December 16, 2021.
 - 1) Submit an amendment to AUP 2019-0176 to detail post-surgical monitoring support. No amendment has been submitted as of the timetable for correction date.

- 2) **Approved (by majority vote):** Extension of timetable for correction to January 20, 2022, as outlined above.
- b) ASTREC – The IACUC was notified of responses to inspection findings.
 - 1) Bldg. 4010 - The empty metabolism pens appeared to not have been cleaned since the last usage. Additionally, the exterior doors to this room were open allowing for pests/vermin to enter the facility easily. Facility was asked to clean and maintain the metabolism pens according to Ag Guide standards. Corrective actions taken: the pens were cleaned 10/28/2021. Personnel were reminded to close doors behind them.
 - 2) Building 4016 – To address inspection concerns about lack of reported central climate control, the facility noted that the UES does have a central monitoring system which sends a text message to the facility manager if the temperatures go outside the set points.

C. Animal Concerns

1. 2021-023-AC*

- a) The AWO Director provided an update to the status of the report for Animal Concern 2021-023-AC.
 - 1) A report from the IO was submitted to OLAW. No response received as of the date of the IACUC meeting.

III. NEW BUSINESS:

A. Facility Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facility has approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction and those inspection results were presented for the IACUC's information only. For one other, the IACUC will need to assign corrective actions, timetables for correction and classifications of the deficiencies as these items were not reviewed/approved via subcommittee prior to the meeting.
 - a) **MREB vivarium – Conducted December 10, 2021 (Members 1066, 1075)**
 - 1) During this inspection approximately 68 individual locations were inspected, and 38 findings were noted related to Cleaning/Environment, EHS – human safety, Expired – cleaning/disinfectant, drugs/substances, feed, instruments/machines & medical supplies, Eyewash, Facility Repair & Function, Improper storage – food/water, Improper/no label, Occ. Health – human safety, Primary enclosure, and Records - Other. A corrective action and timetable for correction was established by the subcommittee for all findings but one including: providing confirmation/clarification on actions, discarding expired items, submitting Amendments, ensuring personnel have reviewed IACUC guidance documents and developing SOPs, training/re-training personnel, and updating labels. All findings were classified as minor.

(a) Approved via subcommittee – December 14, 2021
 - 2) One inspection finding was called to full committee review regarding a dirty cage noted in a housing room. CMP personnel indicated during the inspection that the cage may have been out of the room during the normal cage change out day. A corrective action and timetable for correction was established by the committee including providing confirmation the cage was changed the day of inspection and providing clarification on how to mitigate this issue in the future. The finding was classified as minor.
 - (a) The AV stated that the Comparative Medicine Program has policies regarding cage changing periods. Research staff are informed of the procedure for cages that need to be changed outside of these periods.
 - (b) **Approved as written (by majority vote) as indicated above**

B. SOP Document Review

1. The AWO Director explained revisions made to approved SOP documents in response to USDA regulatory changes, specifically the removal of the annual continuing review requirement for AUPs in each of the following documents:
 - a) TAMU-S-013 Continuing Review of Animal Use Protocols - Annual and Triennial

- b) TAMU-S-002 IACUC Submission Review Mechanisms
- c) TAMU-S-003 Significant and Minor Changes to Approved Animal Activities
- d) TAMU-S-007 Post-Approval Monitoring Performed by AWO Staff
- e) TAMU-S-014 Procedure for Conducting IACUC Business in the Event of a Pandemic or Other Significant Emergency

2. **Approved (by majority vote):** As written; no additional modifications required with the effective date and expiration date, respectively, as shown below:

- a) TAMU-S-013 – Effective date December 27, 2021; Expires October 31, 2024
- b) TAMU-S-002 – Effective date December 27, 2021; Expires July 31, 2023
- c) TAMU S-003 – Effective date December 27, 2021; Expires October 31, 2024
- d) TAMU-S-007 – Effective date December 27, 2021; Expires January 31, 2024
- e) TAMU-S-014 – Effective date December 27, 2021; Expires December 31, 2023

C. Adverse Events

1. 2021-026-AE

- a) AWO staff presented the results of a subcommittee's investigation of an adverse event report describing two separate but related adverse events involving loss of power to a room housing aquatic species.
- b) The subcommittee found that repairs and upgrades to mitigate further events have started and recommended a list of corrective actions.
- c) IACUC members discussed the merit of asking for an update at a future IACUC meeting or if the PI contacting CMP would be sufficient.
- d) A member asked if the electrical trouble was related to overloaded circuits or poor equipment. A member of the subcommittee responded that it was a combination.
- e) A member mentioned that the pumps may need to be replaced. A member of the subcommittee indicated that the PI has bought new pumps. The Chair recommended that this information be added to the report.
- f) **Approved (by majority vote):** as revised
 - 1) The PI must provide an update on the renovation work being done on the room by January 19, 2022 in order to be presented at the January 20, 2022 IACUC meeting.
 - 2) The PI must confirm that they will not house animals in this room until the room has been inspected and approved for use by the IACUC. This inspection can be scheduled prior to January 19, 2022 if updates are completed prior to this date.

D. Semiannual Program Review Assignments

- 1. An AWO staff member presented the OLAW checklist to be used by members for the semiannual program review. Members volunteered to complete specific sections of the checklist and report their findings at the January 20, 2022 IACUC meeting.

[All non-RCB visitors were asked to exit the meeting or remain in the waiting room]

IV. POTENTIAL NON-COMPLIANCE/NON-COMPLIANCE UPDATES

A. 2021-019-NC

- 1. An investigative subcommittee appointed by the IACUC Chair performed an investigation into a potential non-compliance.
 - a) The subcommittee noted that the concern has been resolved and the PI understands the need for final protocol approval prior to initiation of animal activities.
 - b) The subcommittee noted that the protocol renewal has been approved.
- 2. **Approved (by majority vote)**
 - a) Categorization: Findings with Noncompliance [Institutional]
 - b) Acceptance of subcommittee corrective actions and closure of the noncompliance report

[1:27pm – Member 1077 exited]

B. 2021-024-NC

- 1. An investigative subcommittee appointed by the IACUC Chair performed an investigation into potential non-compliance.
 - a) The subcommittee noted that client owned animals were treated without IACUC approval.

- b) The subcommittee noted that the PI has been removed from live animal work by their department.
 - c) A member asked if any treated animals experienced an adverse reaction to the treatment. The subcommittee said no adverse reactions were reported.
 - d) The Chair and members discussed the limits of IACUC authority as it pertains to clinical trials in the veterinary school.
2. **Approved (by majority vote)**
- a) Categorizations:
 - 1) Item 1: Findings with Noncompliance [Regulatory]
 - 2) Item 2: Findings with Noncompliance [Regulatory – unrelated to Animal Welfare]
 - b) Acceptance of subcommittee suggested corrective actions and closure of the noncompliance report

[All non-RCB visitors in the waiting room were invited to re-enter the meeting]

V. MEMBER TRAINING

A. Multiple Survival Surgery

- 1. AWO staff presented information on details and considerations related to the performance of multiple survival surgery on a single animal use protocol.
- 2. The board discussed the need to request approval from the USDA for covered species prior to performing MSS on separate AUPs.

MEETING ADJOURNED at 2:15 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

January 20, 2022
MINUTES

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1040, 1096(A), 1062(A), 1049, 1076, 1067, 1046, 1052, 1068, 1088(A), 1079, 1093, 1004, 1089, 1039, 1071, 1075, 1094(A), 1080(A), 1090(A), 1028, 1066, 1051, 1016, 1087(A)
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A); 1092(A)
VOTING MEMBERS ABSENT:	1091, 1059, 1063, 1082, 1085, 1011, 1077
ALTERNATE MEMBERS ABSENT:	1095, 1084, 1069, 1012, 1086,
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Manager, BOHP; Assistant Director, AWO; Associate Vice President, VPR

CALL TO ORDER:

- The Meeting was formally called to order at 12:32 PM by the Chair. The meeting quorum is 15 members. Twenty-six voting members were present when the meeting was called to order.

I. INTRODUCTIONS

- A. The Chair introduced the Associate Vice President for Research. The Associate Vice President remarked on the success of the IACUC and animal welfare program and the support of the previous and current Vice President for Research.

II. ANNOUNCEMENTS

- A. The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- B. **Next IACUC meeting**
- The next IACUC meeting will take place at 12:30 PM, February 17th, 2022. The meeting will be conducted via Zoom.
- C. **Upcoming Inspections**
- AWO staff will send an email to solicit volunteers for upcoming inspections.
 - Upcoming Inspections; additional volunteers are welcome to participate
 - MSRB* – January 26, 2022.** No additional volunteers are needed for this in-person inspection.
 - VBEC* – January 28, 2022.** No additional volunteers are needed for this in-person inspection.
 - ILSB Vivarium* – February 9, 2022.** Two volunteers are needed for this in-person inspection.
 - PRSC – February 10, 2022.** One volunteer is needed for this in-person inspection.
 - LARR Day 1* – February 23, 2022.** Two to three volunteers are needed for this in-person inspection.
 - LARR Day 2* – January 13, 2022.** Two to three volunteers are needed for this in-person inspection.

[12:34pm – Member 1089 entered]

D. Cayuse/Huron Demonstrations

- The AWO Director informed members that two compliance software options, Cayuse and Huron, will be providing demonstrations at the beginning of February. Members will receive links to the demonstrations when they become available.
- The Associate VPR asked members to please attend demonstrations so that they can provide input on the software.
- A member asked if there was a difference in cost. The AWO Director replied that they were not sure at this stage.

4. A member asked, if the software was adopted, would the protocols in iRIS be moved to Cayuse or Huron. The AWO Director said that it was too early to tell, and no decision has been made.

E. AV Facilities Update

1. The AV informed the Board about the need for temporary housing of animals at the Kleberg vivarium over winter break. The animals were moved from Reynolds to make planned electrical improvements to the building and housed at Kleberg for 10 days.

III. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the December 16, 2021 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. The majority of findings with timelines for correction prior to the meeting were addressed with one item requiring an extension of the timetable for correction. An extension of this timeline to March 31, 2022 is requested for the following finding:
 - a) **ASTREC** – The IACUC was notified of responses to inspection findings.
 - 1) Pasture behind 4022 – Feed troughs in these pastures have pieces of sheet metal along the bottom of them. The metal is breaking and has sharp edges. The facility has requested an extension to March 31st 2022 to complete the necessary repairs.
 - 2) The Chair asked if the extension could be granted with the stipulation that no animals be kept in the area until repairs have been made.
 - 3) The AWO Director asked if the troughs could be moved. A member replied that the troughs could not be moved, but no animals were housed in this area.
 - 4) **Approved (by majority vote):**
 - (a) Extension of timetable for correction to March 31, 2022, as outlined above.
 - (b) Modification: no animals may be housed in the area listed until repairs are complete.

[12:45pm – Member 1080 entered]

C. Adverse Events

1. **2021-026-AE**
 - a) AWO staff provided an update to the status of the report for Adverse Event 2021-026-AE.
 - 1) No renovations have begun at this time. The PI has confirmed that no animals will be housed until the IACUC inspects and approves the location.

IV. NEW BUSINESS:

A. Facility Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facility has approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction and those inspection results were presented for the IACUC's information only.
 - a) **MREB* – Conducted December 8, 12 & 15, 2021 (Members 1078, 1087)**
 - 1) During this inspection approximately 37 individual locations were inspected, and 25 findings were noted related to Animal records – daily care, Animal records – surgery, Aseptic technique, Cleaning/Environment, Expired – cleaning/disinfectant, Expired – drugs/substances, Expired – Medical Supplies, Expired – other, Eyewash, Occ. Health – human safety, Other, Records – Controlled substances, Records – Other, and Training. A corrective action and timetable for correction was established by the subcommittee for all findings including: updating husbandry agreements, reviewing IACUC Guidance documents, posting updated signage, confirming actions, discarding expired substances, validation of cleaning SOPs, submitting Amendments, retraining, testing eyewash stations, and updating daily care sheets. All findings were classified as minor.

- (a) AWO staff brought the IACUC's attention to a specific finding regarding surgical records being discarded 10 days post euthanasia. As a corrective action, the PI was asked to confirm that surgical records be retained for the lifetime of the AUP.
 - (b) **Approved via subcommittee – December 17, 2021 and January 8, 2022**
- b) **Misc. Fac. – Conducted December 9, 2021 (Members 1078, 1090)**
 - 1) During this inspection 4 individual locations were inspected, and one finding was noted related to Records - Other. A corrective action and timetable for correction was established by the subcommittee including: submitting an Amendment. The finding was classified as minor.
 - (a) **Approved via subcommittee – January 10, 2022**
- c) **GGB – Conducted January 11, 2022 (Members 1075, 1096)**
 - 1) During this inspection 4 individual locations were inspected, and no findings were noted.
- d) **COS – Conducted January 13, 2022 (Members 1066, 1075)**
 - 1) During this inspection approximately 35 individual locations were inspected, and 18 findings were noted related to Animal records – daily care, Animal records – health, Cleaning/Environment, Facility Repair & Function, Improper storage – food/water, Improper/unclear/no label, Occ. Health – human safety, Records – AUP, Records - Other. A corrective action and timetable for correction was established by the subcommittee for all findings including: Updating signage, updating cage cards, updating daily care sheets, providing clarification, confirming work orders have been submitted and/or other actions, disinfecting cleaning implements and/or housing enclosures, moving bulk feed, updating tank cards and submitting an Amendment. All findings were classified as minor.
 - (a) **Approved via subcommittee – January 20, 2022**
- 2. For the following inspection findings, the IACUC will assign corrective actions, timetables for correction and classifications of the deficiencies as these items were not reviewed/approved via subcommittee prior to the meeting.
 - a) **MREB I* – Conducted December 8, 2021 (Members 1039, 1087, 1052)**
 - 1) During this inspection approximately 40 individual locations were inspected, and 23 findings were noted related to Animal records – surgery, Cleaning/Environment, Expired – cleaning/disinfectant, drugs/substances, feed, instruments/machines, and medical supplies, Eyewash, Improper/no label, Records – controlled substances and Records - Other. A corrective action and timetable for correction was established by the committee for all findings including: confirming expired materials were discarded, reviewing IACUC Guidance documents, updating drug logs, and providing confirmation of actions. All findings were classified as minor.
 - (a) **Approved as written (by majority vote) as indicated above**
 - b) **WFES – Conducted December 15, 2021 (Member 1078)**
 - 1) During this inspection three individual locations were inspected, and one finding was noted related to Animal records – daily care and Records - other. A corrective action and timetable for correction was established by the subcommittee: to submit an Amendment to the AUP. The finding was classified as minor.
 - (a) **Approved as written (by majority vote) as indicated above**
- 3. Members discussed the frequency of inspection findings in general and the use of expired drugs in animals specifically. A member pointed out that expired materials are only of concern to the IACUC if used on or around animals (administered directly to animals or cleaning agents used to clean areas animals may be used).

B. Programmatic Changes

1. Auto FCR Review

- a) The AWO Director reminded members that the IACUC no longer maintains specific criteria for protocols and amendments to automatically undergo full committee review (FCR). The Director asked members to consider requiring that the first AUP from a new PI be reviewed via FCR. The Director explained that FCR would allow the IACUC to become familiar with a new PI and their scope of work; and would introduce the IACUC to the new PI.

- b) The Chair asked if this requirement should be incorporated into an IACUC SOP. The AWO Director suggested trying out the requirement and deciding whether to incorporate it into the relevant SOP at a later date or upon renewal.
- c) The Members generally agreed that they would be interested in informally implementing the requirement discussed.

2. **USDA Regulation Classification (USDA or Not)**

- a) The AWO Director introduced a reference document outlining the species and activities which may or may not fall under USDA regulation. The Director asked the IACUC to consider the use of this document as a reference to assist the PI in completing the AUP, as well as the IACUC with reviews and inspections.
- b) The Chair asked about the purpose of document; the AWO Director explained that eventually the text of the document would be incorporated into the help text within the AUP and posted to the web for reference by the PI, Board and AWO.
- c) The Chair asked for clarification regarding rodent species and wildlife studies covered by the USDA regulations. This was discussed amongst the membership.
- d) The AWO Director directed IACUC member attention to the USDA Technical Note included in the meeting materials which provides further guidance related to wildlife and field studies.
- e) The Members generally agreed that the document could be used as a general reference, with the AWA/AWR the official regulatory document.

3. **Pain and Distress Category Examples**

- a) The AWO Director introduced a document composed to assist in the determination of the USDA Pain and Distress Category identified in the AUP. It was noted that while USDA pain categorization is not required for non-USDA regulated species/activities, there is no immediate plan to eliminate the use of USDA pain/distress categorization within the current AUP due to the complexity of the change.
- b) The Director indicated that this document may be added to the reviewer checklist, or otherwise made available for reference by PIs, the Board and AWO.

C. **Semiannual Program Review (SAPR)**

1. **Programmatic Changes Approved Since the Last SAPR**

- a) A member of the AWO staff presented a list of programmatic changes implemented since the last SAPR; including changes in membership, the elimination of AUP continuing reviews, approval of PAM staff to act as ad-hoc inspectors for PI transport vehicles, and the approval of several IACUC guidance and SOP documents.

2. **CMP SOP Documents**

- a) The AV provided a description of the SOP documents produced and used by CMP as part of their program of animal care. Two example documents were shared with the Board:
 - 1) A.IV.J. Fire Fly System 2 -Equipment Sanitation Verification
 - 2) F.I.D.1 Empty Small Animal Room Decontamination

3. **Program Review Checklist**

- a) Members presented their evaluations of specific portions of the checklist. The Chair reminded members to limit their comments to those pertaining to findings or those items which require discussion. The Board classified each deficiency identified as minor or significant (all minor), established corrective action plans and established timetables for correction:
 - 1) Section I.A.1: Animal Care and Use Program – all items received evaluations of Acceptable.
 - 2) Section I.A.2: Disaster Planning and Emergency Preparedness – the following items received evaluation findings of minor:
 - (a) I.A.2a: There is inadequate information in the disaster plan regarding inclusion of satellite locations; the CMP disaster plan needs to be updated to incorporate satellite locations.
 - (b) I.A.2e: There is inadequate information in the disaster plan regarding the preservation of critical or irreplaceable animals; the institutional disaster plan needs to be updated to incorporate specific details regarding critical or irreplaceable animals on campus.
 - (c) The IACUC approved a corrective action for these items to include updates to the institutional disaster plan to address the items identified.
 - (d) The IACUC approved a timeline for correction of July 31, 2022.
 - (e) All other items in section I.A.2 received an evaluation of Acceptable.

- 3) Section I.A.3: IACUC - All items received evaluations of Acceptable.
- 4) Section I.A.4: IACUC Protocol Review – Special Considerations – all items received evaluations of Acceptable.
 - (a) The member performing the evaluation suggested incorporating links to applicable guidance documents in the AUP.
 - (b) The member performing the evaluation provided the following comments for individual section items:
 - (1) I.A.4n: While the need for justification for the performance of multiple survival surgery on a single animal is not addressed in the IACUC Guidance on surgery (TAMU-G-013, TAMU-G-049, etc.), justification is required within the AUP, and the review performed by the Board is the same regardless of USDA regulated status. Recommend adding wording about justification of multiple survival procedures in appropriate IACUC Guidance.
 - (2) I.A.4p: The requirement for at least weekly collection of body weight for food/fluid restricted animals needs to be added to the help text in the AUP.
 - (3) I.A.4q: The requirement for daily written records to be maintained for food/fluid restricted animals needs to be added to help text in the AUP.
 - (4) I.A.4v: The standards for toe-clipping are listed in IACUC Guidance TAMU-G-007, *Guidelines on Genetically Modified Animals and Genotyping*. It is recommended that a link to this document be incorporated into the AUP.
 - (c) The IACUC thanked the members for their comments and took no actions.

[1:39pm – Member 1049 exited]

- 5) Section I.A.5: IACUC Membership and Functions - all items received evaluations of Acceptable.
- 6) Section I.A.6: IACUC Training - all items received evaluations of Acceptable.
- 7) Section I.A.7: IACUC Records and Reporting Requirements - all items received evaluations of Acceptable.
- 8) Section I.A.8: Veterinary Care - all items received evaluations of Acceptable.
- 9) Section I.A.9: Personnel Qualifications and Training - all items received evaluations of Acceptable.
- 10) Section I.A.10: Occupational Health and Safety of Personnel - all items received evaluations of Acceptable.
 - (a) The member performing the review commented that the BOHP program should be commended on their actions to overcome issues with providing PPE for BSL3 labs.
- 11) Section I.A.11: Personnel Security - all items received evaluations of Acceptable.
- 12) Section I.A.12: Investigating & Reporting Animal Welfare Concerns - all items received evaluations of Acceptable.
- 13) Section I.B.1: Clinical Care and Management - all items received evaluations of Acceptable.
- 14) Section I.B.2: Animal Procurement and Transportation/Preventative Medicine - all items received evaluations of Acceptable or Not Applicable.
 - (a) The member performing the review commented that item 2d is not applicable as TAMU does not use or purchase random-sourced dogs and cats.
- 15) Section I.B.3: Surgery – the following item received an evaluation finding of minor:
 - (a) I.B.3j: There is inadequate information in the IACUC Guidance TAMU-G-049 regarding keeping the skin of aquatic species moist during surgical procedures. The guidance addresses amphibians but not other aquatic species.
 - (b) The IACUC approved a corrective action for this item to include making applicable additions to TAMU-G-049.
 - (c) The IACUC approved a timeline for correction of July 31, 2022.
 - (d) All other items in section I.B.3 received an evaluation of Acceptable.
- 16) Section I.B.4: Pain, Distress, Anesthesia, and Analgesia - all items received evaluations of Acceptable.
 - (a) Item I.B.4g: The member performing the review commented that the term “muscle relaxant” is used interchangeably in Section 5.3.4 of Guidance TAMU-G-002.

[1:50pm – Member 1075 exited]

- 17) Section I.B.5: Euthanasia - all items received evaluations of Acceptable.
- 18) Section I.B.6: Drug Storage and Control - all items received evaluations of Acceptable.

- (a) The member performing the review commented that the section contains items concerning drug storage, logs, etc. As the IACUC is focused on animal welfare, drug storage and use are typically examined from an animal welfare perspective.

[1:55pm – Member 1087 exited]

- b) **Approved (by majority vote):** as indicated above.

4. **Departures and Exceptions Checklist**

- a) A member of the AWO staff presented a list of Departures from the Guide and Exceptions from the AWR approved by the IACUC for use in animals since the last SAPR.

5. **Program Metrics**

- a) Members were encouraged to review the program metrics available in iRIS documents for the meeting.

[2:09pm – Member 1090 exited]

6. **BOHP Metrics**

- a) A BOHP staff member presented metrics related to the occupational health program. The staff member provided data regarding the number of personnel enrolled in the BOHP program, the contact actions for rabies surveillance, the number of fit tests provided, and incidence response reports filed.

MEETING ADJOURNED at 2:11 pm; quorum was maintained for the entirety of the meeting.

**TEXAS A&M UNIVERSITY
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE**

**February 17, 2022
MINUTES**

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1096(A), 1062, 1049, 1091, 1076, 1059, 1052, 1068, 1079, 1082, 1085, 1089, 1039, 1071, 1075, 1077, 1094(A), 1028, 1066, 1051, 1016, 1087(A)
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A); 1092(A)
VOTING MEMBERS ABSENT:	1040, 1067, 1046, 1093, 1004, 1011
ALTERNATE MEMBERS ABSENT:	1095, 1088, 1063, 1084, 1069, 1012, 1086, 1080, 1090
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Manager, RCB; Assistant Director, AWO; Compliance Officer I, Texas A&M AgriLife Research

CALL TO ORDER:

- The Meeting was formally called to order at 12:31 PM by the Chair. The meeting quorum is 15 members. Twenty-two voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- A.** The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.

B. Next IACUC meeting

- The next IACUC meeting will take place at 12:30 PM, March 17th, 2022. The meeting will be conducted via Zoom.

[12:32pm – Member 1077 entered]

C. Upcoming Inspections

- AWO staff will send an email to solicit volunteers for upcoming inspections.
- Upcoming Inspections; additional volunteers are welcome to participate
 - LARR Day 1* – February 23, 2022.** No additional volunteers are needed for this in-person inspection.
 - LARR Day 2* – February 24, 2022.** No additional volunteers are needed for this in-person inspection.
 - KLCT/CMAT Labs – March 3, 2022.** Two volunteers are needed for this in-person inspection.
 - PSYC – March 9, 2022.** One volunteer is needed for this in-person inspection.
 - Galveston – TBD.** No additional volunteers are needed for this in-person inspection.

D. AAALAC Site Visit

- The AWO Director informed members that Texas A&M has been granted a change in site visit timing from the AAALAC Summer trimester to the Winter trimester. Our next site visit will be between January and March 2023.

[12:34pm – Members 1076 and 1091 entered]

E. New Reference Resources

- The AWO Director informed members that the two documents presented at the January meeting have been added to TAMU documents. They are now part of the review checklist documents and available on the website. The Director thanked the CMP veterinarians for their assistance in the document preparation.
 - TAMU-C-008b Pain & Distress Categorization
 - TAMU-C-008c USDA or Not

F. Continuing Education Opportunities for IACUC Members

- The AWO Director informed members of several upcoming or existing training opportunities. Members were encouraged to inform the AWO of any training completed for documentation of continuing education.

- a) Upcoming OLAW Webinar: 21st Century Cures Act - Updates and Your Questions Answered, March 10, 2022, 12:00-1:00, <https://olaw.nih.gov/education/educational-resources/webinar-2022-03-10.htm>
- b) OLAW Webinars available for viewing on-demand (may be shared with faculty):
 - 1) Research Involving Animals: 2021 NIH Virtual Seminar Session, <https://grants.nih.gov/2021-nih-virtual-seminar.htm>
 - 2) Animals in Research: Tips to Keep out of the Doghouse: 2021 NIH Virtual Seminar Session, <https://olaw.nih.gov/education/educational-resources/webinar-2021-11-04.htm>

II. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the January 20th, 2021 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. The following findings and facility responses were presented to the IACUC for information purposes only; no vote required.
 - a) MREB 1226 – Two overcrowded cages were noted on 12/7/2021. CMP responded with their protocol for overcrowded cages.
 - b) BSBW Rodent rooms – Inspectors asked for clarification of how daily health checks are performed and how these observations are documented and relayed to veterinary staff. Facility management responded with the standard procedures. Satisfactory clarification was provided to confirm daily health checks.
 - c) BSBW B3B, B3C, B5J – Inspectors could not determine whether the sanitization schedule and standards for rabbits and bats conforms to regulatory standards. The facility response explained that rabbits were moved shortly after the inspection so regulatory standards were met and that bat sanitization schedules were in accordance with standards. The facility submitted a request for programmatic exception for mouse cage sanitization.
2. The following findings and facility responses were presented to the IACUC with a request for clarification.
 - a) MREB Cagewash – The original corrective action plan was a request for confirmation that the rack wash had dual de-energizing pull cords inside. Facility personnel explained the glass door rack wash has one pull cord, recently replaced. AAALAC specifies that the pull cord be easily reachable from anywhere inside the cagewash machine.
 - 1) The AV asked if the cord was part of the manufacturer's installation. AWO staff stated they did not know.
 - 2) A member explained that, though AAALAC does not specify a need for two cords, "regulatory creep" may lead to concerns about one cord fulfilling regulatory requirements. However, two cords are not needed. Another member clarified that the primary concern was human safety rather than meeting AAALAC requirements.
 - 3) Further discussion resulted in a revised corrective action: AWO staff should request additional clarification – is the one cord installed per manufacturer's specification? Is there space for a second de-energizing cord or is the single cord on the opposite side from the designated push-point (ensuring personnel could exit from either side of the washer). The timetable for correction was extended to March 17, 2022 to allow time for these answers to be obtained.
 - b) MREB PI lab – The original finding noted that behavior chambers were not cleaned as described in the AUP. The PI's response clarified that they are cleaned as described. It was recommended that the finding be struck from the report.
 - c) **Approved (by majority vote):**
 - 1) Revised corrective action and timetable extension for first item and second item struck from report
3. The majority of the findings with timetables for correction in February have been corrected. The following findings and facility responses were presented to the IACUC with a request for an extension of the timetables for correction.
 - a) REYN Autoclave records – AWO staff requested a timetable for correction extension for this as autoclave managers are not yet in place but should be by the next semiannual facility inspection.
 - 1) Suggested timetable for correction extension to May 31, 2022.

- b) MREB – AWO staff requested a timetable for correction extension for the following findings as they are either waiting on a response to a request for clarification from the PIs/lab personnel or have not yet received a response from the responsible individual(s): Submitting an Amendment or VVC to an AUP (3 findings), reviewing IACUC Guidance documents (5 findings), creating and validating cleaning SOPs (3 findings), confirming expired substances have been discarded and/or secondary containers have updated labels (6 findings).
 - 1) Suggested timetable for correction extension to March 17, 2022
- c) WFES – AWO staff requested a timetable for correction extension for the following finding as it is currently under review in iRIS: Submitting an Amendment to request an exception from daily care.
 - 1) Suggested timetable for correction extension to March 17, 2022
- d) COS – AWO staff requested a timetable for correction extension for the following findings as they have not received a response from facility management at this time: Submitting an exception request and/or individual AUP amendments (2 findings) and confirming tank card information is updated.
 - 1) Suggested timetable for correction extension to March 17, 2022
- 4. The Chair asked about the seemingly large number of outstanding findings. AWO staff explained that this was expected due to the size of one of the inspected facilities.
- 5. A member suggested that Post-approval Monitors be asked to follow up on some of the deficiencies in order to provide more direct support and instruction to PIs through direct contact. AWO staff explained that facility access is regulated in the majority of areas via access cards, but that PAM staff may be able to obtain access.
- 6. A member asked about verification of sanitization processes. AWO staff explained that a number of cleaning SOPs have already been validated and PIs can contact CMP for those SOPs or for assistance in validating procedures and explained PIs/lab personnel are informed about this in the notification they receive with the findings/corrective actions.
- 7. The AWO Director stated that repeated failure to address inspection findings constitutes noncompliance and would need to be addressed by the IACUC. The Chair expressed support for incorporating phone calls and contact from the Chair in communications with PIs.
- 8. The AWO Director presented the specific position statement from AAALAC regarding walk-in rack wash systems. A member asked if the manufacturer could be contacted and options to install a second cord explored. Another member requested that care be taken in determining the needs for personnel safety.
- 9. A member asked a question about the practicality of transporting animals between vivaria and laboratory spaces in opaque secondary containers. The AWO Director explained that the approved TAMU guidance states that animals must be placed in containers during transport. The member asked for clarification regarding the secondary containers. The staff shared a picture of one option for secondary cage transport.
- 10. A member asked for the original date of notification for one finding. The member expressed that a lack of response would negate the appropriateness of providing an extension. The Chair asked the AWO Director if this would constitute noncompliance, and the AWO Director said yes. The Chair asked if this was the first extension of timetable for correction, and AWO staff confirmed that it was. The AWO Director reminded members that the IACUC's concern with potential noncompliance related to inspection findings is focused primarily on animal welfare.
- a) **Approved (by majority vote):**
 - 1) Extension of timetables for correction to March 17, 2022, as outlined above, except for the item noted at Reynolds which was extended to May 31, 2022.

C. Update to Semiannual program review deficiencies

- 1. The AWO Director reminded the IACUC that a deviation from a must/should statement in the *Guide* without IACUC approval is reportable to OLAW through the IO as non-compliance.
- 2. The AWO Director presented reviewer-identified findings and comments discussed as part of the Program Review Checklist during the SAPR, along with the applicable section from the *Guide*. The IACUC discussed potential revisions to the findings:
 - a) Item 1: I.A.2a - original finding: There is inadequate information in the disaster plan regarding inclusion of satellite locations; the CMP disaster plan needs to be updated to incorporate satellite locations.
 - 1) The IACUC discussed if the CMP disaster plan deviated from the relevant Must statement in the *Guide*.

- 2) A member pointed out that the disaster plan is a living document and can be updated without needing to notify regulatory agencies.
- 3) The AWO Director explained that all satellite facilities are under the purview of the IACUC, but the AWO does not retain the disaster plans of those facilities.

[1:22pm – Member 1085 exited]

- 4) The AV stated that the SAPR review did not include the disaster plans of satellite facilities, but the CMP disaster plan can be updated to include the other facility disaster plans.
- 5) The IACUC determined that the finding should be modified to a suggestion for improvement to state: That the CMP disaster plan be updated by incorporating disaster plans of satellite locations and that the existing disaster plans are combined into one document to allow for overall review by the IACUC.
- b) Item 2: I.A.2e – original finding: There is inadequate information in the disaster plan regarding the preservation of critical or irreplaceable animals; the institutional disaster plan needs to be updated to incorporate details.
 - 1) The IACUC discussed if the existing CMP disaster plan deviated from the relevant Must statement in the *Guide*.
 - 2) A member stated that the disaster plan lacks clarity regarding contacts for existing critical or irreplaceable animals.

[1:28pm – Member 1079 exited]

- 3) The AV clarified that the contacts for critical and irreplaceable animals are maintained outside of the disaster plan, but that the CMP disaster plan could be edited to include that information.
- 4) The IACUC determined that the finding should be modified to a suggestion for improvement to state: The section of the disaster plan which talks about critical or irreplaceable animals should be more explicitly defined for ease of access to the information during a disaster.

[1:29pm – Member 1071 exited]

- c) Item 3: I.A.4p – original comment: The requirement for at least weekly collection of body weight needs to be added to the help text in iRIS.
 1. The AWO Director noted that this information is currently a part of the question in iRIS and suggested that the comment be struck.
- d) Item 4: I.A.4q – original comment: The requirement for daily written records to be maintained for food/fluid restricted animals needs to be added to help text in the AUP.
 - 1) The AWO Director noted that this information is currently a part of the question in iRIS and suggested that that comment be struck.
- e) Item 5: I.B.3j – original finding: There is inadequate information in the IACUC Guidance TAMU-G-049 regarding keeping the skin of aquatic species moist during surgical procedures. The guidance addresses amphibians but not other aquatic species.
 - 1) The AWO Director indicated that surgery in fish is addressed in a different Guidance (TAMU-G-035; approved 8/2/21), which includes the requirement to keep the fish's skin moist at all times during surgery, and suggested that the comment be struck.

[1:35pm – Member 1079 re-entered]

3. **Approved (by majority vote):**

- a) Items 1 and 2 – findings are relegated to suggestions for improvement as described above.
- b) Items 3, 4, and 5 – findings/comments are struck

III. NEW BUSINESS:

A. SAPR Report to IO

1. The committee reviewed the SAPR report to the IO for the semiannual program review conducted in January. A member of the AWO staff stated that the Semiannual Program Review section of the IO report would be updated to reflect the approved relegated findings (SFIs) described in section II.C.3 of these minutes. The committee was informed that the full IO report with the incorporated changes and updated inspection details list would be distributed for review and signature via DocuSign.

B. Facility Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facility has approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction and those inspection results were presented for the IACUC's information only.

a) **MSRB* – Conducted January 26, 2022 (Members 1049, 1096, 1075)**

- 1) During this inspection approximately 34 individual locations were inspected, and 8 findings were noted related to Cleaning/Environment, Expired – instruments/machines, Medical supplies, Facility Repair & Function, Improper/unclear/no label, and Other. A corrective action and timetable for correction was established by the subcommittee for all findings including: confirming actions, providing a description of sanitation procedures, discarding expired materials, re-seating a ceiling tile, providing clarification, and confirming a work order has been submitted. All findings were classified as minor.

(a) **Approved via subcommittee – January 31, 2022**

b) **VBEC* – Conducted January 28, 2022 (Members 1078, 1093)**

- 1) During this inspection approximately 29 individual locations were inspected, and one finding was noted related to Emergency response. A corrective action and timetable for correction was established by the subcommittee including: updating emergency contact information. The finding was classified as minor.

(a) **Approved via subcommittee – February 1, 2022**

c) **ILSB* – Conducted February 9 & 10, 2022 (Members 1062, 1075, 1078, 1090)**

- 1) During this inspection approximately 59 individual locations were inspected, and 29 findings were noted related to Animal records – daily care, Animal records – surgery, Aseptic technique, Cleaning/Environment, EHS – human safety, Expired – cleaning/disinfectant, drugs/substances, Facility Repair & Function, Improper storage – drugs, other, Primary enclosure, Records – AUP, Records – Controlled substances and Other. A corrective action and timetable for correction was established by the subcommittee for all findings including: confirming actions, ensuring appropriate secondary containment, confirming work orders are submitted, submitting an Amendment/VVC, providing clarification/confirmation regarding animals and updating cage cards, discarding expired materials, updating drug logs, updating lab records, updating thermoregulatory support, creating/validating sanitation SOPs, confirming CO2 flow rate, and replacing a euthanasia setup. All findings were classified as minor.

(a) **Approved via subcommittee – February 15, 2022**

2. For the following inspection findings, the IACUC will assign corrective actions, timetables for correction and classifications of the deficiencies as these items were not reviewed/approved via subcommittee prior to the meeting.

a) **ILSB* – Conducted February 9, 2022 (Members 1062, 1090)**

- 1) Two inspection findings from this inspection were called to FCR for review. The first included humidity levels in rooms (macroenvironment). The IACUC discussed the issue and requested clarification on if animals have presented with issues associated with low humidity as the corrective action. The second involved the cage rack washer with only 1 de-energizing cord. The IACUC requested additional clarification regarding personnel ability to exit the machine in event of emergency as the corrective action. Both findings were classified as minor and a timeline for correction established.

(a) **Approved as written (by majority vote) as indicated above**

C. Guidance Document Review

1. **TAMU-G-025 Guidelines on Physical Methods of Euthanasia in Warm Blooded Species**

- a) The IACUC discussed suggested modifications to the section on thoracic compression presented by two members of the board.
 - 1) The AWO Director indicated that the original text was congruent with the AVMA guidelines on euthanasia.

- 2) A member explained that the previous wording discouraged all use of thoracic compression. This is a commonly used method in wildlife biology, and new research supports its use and the user's ability to manage pain and distress.
- 3) A member stated that the original text was conflicted and an edit was necessary for clarification. Researchers have used this technique for a long time and a number of papers have been published which support the continued use of this technique; it is appropriate for remote areas where other methods aren't possible. The member recommended there be a mechanism for the IACUC to grant approval for this technique.
- 4) The AWO Director stated that the AVMA guidelines find this method unacceptable, but regulatory bodies have stated that the IACUC can review and approve exceptions to the AVMA guidelines.
- 5) The AWO director pointed out additional references added to the Reference section of the guidance related to thoracic compression.
- 6) A member pointed out that some scientific journals will not accept this method used in manuscripts or will require justification.
- 7) A member reminded members that the AVMA guidelines on euthanasia do change regularly to reflect scientific advances.
- 8) A member asked if "rapid cardiac compression" is identical to thoracic compression as used in the text of the guidance. The AWO Director directed the member to the definition in the definitions section of the guidance.
- b) **Approved as revised (by majority vote)**
 - 1) Revision of procedural description for thoracic compression to further clarify usage and need for justification and IACUC review and approval
 - 2) Inclusion of additional references related to thoracic compression

D. Request for Programmatic Exception

1. 2020-001-E updated 2.17.2022

- a) The committee reviewed a requested amendment to an already-approved programmatic exception to include an exception from sanitary standards to extend the 2-week sanitation frequency of select housing systems to monthly. It was noted that the facility performs contact plate sampling bi-weekly to monitor cleanliness.
- b) A member asked about the portion applicable reference from the *Guide*, which was provided by the AWO Director for member review.
- c) A member asked what media is being used for the contact plates. Another member replied that a specific auger plate is being used. The first member explained that the contact plate used will impact results.

2. Approved (by majority vote): As written

IV. MEMBER TRAINING

A. PRIM&R AROC Demo

1. AWO staff presented a demonstration of the PRIM&R Animal Research Oversight Course (AROC), including how to access the training course.

MEETING ADJOURNED at 2:21 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY – IACUC 1 (College Station, Dallas, Galveston)
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

March 24, 2022
MINUTES

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1040, 1096(A), 1062, 1049, 1091, 1076, 1099(A), 1067, 1052, 1068, 1079, 1082, 1093, 1085, 1089, 1039, 1097, 1075, 1077, 1080(A), 1090(A), 1028, 1051, 1016
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A); 1092(A), 1094(A)
VOTING MEMBERS ABSENT:	1059, 1046, 1004, 1071, 1011, 1098, 1066
ALTERNATE MEMBERS ABSENT:	1088, 1063, 1084, 1100, 1069, 1012, 1086, 1087
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Assistant Director, AWO; Compliance Officer I, Texas A&M AgriLife Research; Senior Risk and Compliance Coordinator, Texas A&M Agrilife Research; Veterinary Resident, Vet Med Pathobiology

CALL TO ORDER:

- The Meeting was formally called to order at 12:30 PM by the Chair. The meeting quorum is 16 members. Eighteen voting members were present when the meeting was called to order.

[12:31pm – Member 1091, 1067, and 1039 entered]

I. INTRODUCTIONS

- A. New members appointed to the IACUC were introduced to the board, including a scientific member/additional vice chair (Member 1098) and a scientific alternate member (Member 1100) both formerly of the TAMU College of Dentistry IACUC, a veterinarian alternate member (Member 1099) also with the Dentistry program, and a scientific member (Member 1097) from the main campus.

II. ANNOUNCEMENTS

- A. The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.

[12:33pm – Member 1094 entered]

B. Next IACUC meeting

1. The next IACUC meeting will take place at 12:30 PM, April 21st, 2022. The meeting will be conducted via Zoom.

[12:34pm – Member 1049 and 1096 entered]

C. Expansion of Board Oversight

1. The TAMU main campus IACUC has assumed oversight of animal activities at the TAMU College of Dentistry (COD) in Dallas.
- The COD IACUC has been dissolved and the COD former IACUC Chair has been added as an additional Vice Chair for this IACUC.
 - Robert Rose (AV) will also be the attending veterinarian for the COD campus.
 - The SAPR schedule will be altered to accommodate the former semiannual review schedule for COD; SAPRs to occur in May and November starting May 2022.
 - The IACUC will need to consider a name to identify the newly-merged IACUC and differentiate it from the IBT/College of Pharmacy Kingsville IACUC.

[12:36pm – Member 1082 entered]

[12:38pm – Member 1080 entered]

D. Upcoming Inspections

1. AWO staff will send an email to solicit volunteers for upcoming inspections.
2. Upcoming Inspections; additional volunteers are welcome to participate
 - a) **Dallas – March 21, 2022.** No additional volunteers are needed for this in-person inspection.
 - b) **Galveston – March 25, 2022.** No additional volunteers are needed for this in-person inspection.
 - c) **Aviary – April 4, 2022.** One volunteer is needed for this in-person inspection.
 - d) **Aquaculture – April 5, 2022.** One volunteer is needed for this in-person inspection.
 - e) **WEAC* – April 6, 2022.** One additional volunteer is needed for this in-person inspection.
 - f) **RELLIS, RSC*, CVM-L pastures – April 7, 2022.** One additional volunteer is needed for this in-person inspection.
 - g) **Pearce & Rosenthal – April 8, 2022.** One additional volunteer is needed for this in-person inspection.
 - h) **Horse Units: EQNR, FREE/EQCT, Horse Center – April 11, 2022.** One additional volunteer is needed for this in-person inspection.
 - i) **Horse Units: EQHSA, PMC, Polo – April 12, 2022.** One additional volunteer is needed for this in-person inspection.
 - j) **VMP* – April 14, 2022.** Two additional volunteers are needed for this in-person inspection.
 - k) **TIPS* – April 18, 2022.** Two additional volunteers are needed for this in-person inspection.
 - l) **ASTREC & PFC & BCS – April 19, 2022.** Two additional volunteers are needed for this in-person inspection.
 - m) **CVM-L Hospital – April 20, 2022.** Two additional volunteers are needed for this in-person inspection.
 - n) **CVM-S Hospital – April 22, 2022.** Two additional volunteers are needed for this in-person inspection.
 - o) **CVM-S Labs/Classrooms – April 27, 2022.** One additional volunteer is needed for this in-person inspection.

E. AV Update

1. The AV provided information regarding electrical upgrades to the Reynolds building and the resulting transfer of animals to temporary housing in the vivarium at Kleberg. The area within the Kleberg facility was inspected and approved for housing prior to the transfer. As of this meeting, the electrical work in Reynolds has been completed and the animals have been returned.

F. Continuing Education Opportunities for IACUC Members

1. The AWO Director informed members of an on-demand training opportunity. Members were encouraged to inform the AWO of any training completed for documentation of continuing education.
 - a) SCAW Annual Winter Conference "Advancing Animal Well-being in Support of Sound Science" videos: <https://www.scaw.com/>
 - b) Members may register for a personal username and password to access resources by emailing SCAW at info@scaw.com

III. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the February 17th, 2021 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. AWO staff reported that most inspection findings with a March due date were corrected; with a few exceptions presented to the board for review. Extension requests to IACUC determined timetables for correction were reviewed. It was noted that all were first time requests for extension:
 - a) VBEC* – AWO staff requested a timetable for correction extension for a finding related to lack of emergency contact information as they are waiting on a response from the building manager (1 finding).
 - 1) Suggested timetable for correction extension to April 21, 2022.
 - b) ILSB – AWO staff requested a timetable for correction extension for the following findings as they are either waiting on a response to a request for clarification from the PIs/lab personnel or have not yet received a response from the responsible individual(s): submitting an Amendment to an AUP (2 findings) and updating post-surgical procedures (1 finding).
 - 1) Suggested timetable for correction extension to April 21, 2022.

- c) ILSB – AWO staff requested the IACUC accept the following items as corrected as all items were minor and were corrected 4-5 days post timetable for correction: updating lab SOPs/surgical record templates (2 findings) and submitting an Amendment (1 finding).
 - 1) AWO staff suggested accepting finding as corrected
 - d) **Approved (by majority vote):** Timetable extension for four requests and accepted as corrected for three requests.
2. The following findings and facility responses were presented to the IACUC with a request for clarification.
- a) MREB* Cagewash – The original corrective action plan included a request for confirmation that the rack washer was equipped with dual de-energizing pull cords. The response from facility personnel indicated that the glass door rack washer included a single pull cord, recently replaced. At a previous IACUC meeting, the original corrective action plan was modified to collect further information regarding the accessibility of the pull cord from within the washer to ensure the safety of the operator. In response, facility personnel provided additional information concerning an alternative safety device/procedure available. It was noted that the rack wash machine has a locking key that must be in place before the machine can be activated. Facility staff indicated the use of this key will be incorporated into their training to ensure the safety of the operator.
 - 1) AWO staff suggested accepting finding as corrected
 - 2) A Member asked if the pull cord was operational. The AV responded that while operational, the pull cord is only on one side, but with the correct use of the key, safety concerns are addressed.

[12:46pm – Member 1089 entered]

- b) **Approved (by majority vote):** Accept corrective action as complete.
3. The following findings and facility responses were presented to the IACUC for information purposes only; no vote required.
- a) ILSB* – discussion of humidity levels within vivarium; provided the same information about the cage washer
 - b) College of Science – It was noted that the facility had submitted a request for exemption to water quality standards based on the recent inspection, to be reviewed by the IACUC during this meeting.

IV. NEW BUSINESS:

A. Facility Inspection Reports

- 1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facility has approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction and those inspection results were presented by AWO staff for the IACUC's information only.
 - a) **ASTREC* – Conducted February 17, 2022 (Member 1073)**
 - 1) During this re-inspection approximately 21 individual locations were inspected and no findings were noted.
 - 2) In November 2021 the IACUC voted to withdraw approval for use of Building 4010 as a housing or surgical procedure location for USDA covered species. The AV reinspected the facility and indicated the facility was acceptable for use as a housing and/or surgical procedure location for USDA covered species at this time. No additional findings noted.
 - 3) **Approved (by majority vote)**
 - (a) Return to utilization of Building 4010 for housing and/or surgical procedure location for USDA covered species
 - b) **LARR* - Conducted February 23 & 24 and March 4, 2022 (Members 1075, 1090, 1087, 1004 and 1078)**
 - 1) During this inspection approximately 136 individual locations were inspected, and 45 findings were noted related to Animal records – daily care, Cleaning/Environment, EHS – human safety, Expired – cleaning/disinfectant, Expired – drugs/substances, Expired – instruments/machines, Expired – Medical supplies, Expired – other, Facility Repair & Function, Improper sharps use, Improper/unclear/no label, Primary enclosure, Records – AUP, Records – Other, and Other.
 - 2) A portion of this inspection was approved via subcommittee and a portion was approved by FCR.

- 3) **Subcommittee (1075, 1090 and 1078):** A corrective action plan and timetable for correction was established by the subcommittee, including the following: Providing confirmation/clarification, confirming expired materials are discarded/labels updated, confirming work orders submitted, updating cage card information, submitting amendments/VVC, confirming areas will be cleaned prior to use, updating training information, confirming pest management plan in place, updating signage, replacing a water bottle, and recertifying equipment. The findings were classified as minor.
 - (a) **Approved via subcommittee – February 28, March 3 & 7, 2022**
- 4) **FCR:** A corrective action plan and timetable for correction was established by the committee, including the following: confirming expired materials discarded, testing emergency showers, submitting an Amendment and updating cage cards. The findings were classified as minor.
 - (a) **Approved as written (by majority vote)** as indicated above
- c) **PSRC – Conducted February 16, 2022 (Member 1062)**
 - 1) During this inspection approximately 23 individual locations were inspected and five findings were noted related to Animals records – daily care, Facility Repair & Function, and Improper/unclear/no label. A corrective action and timetable for correction was established by the subcommittee, including: confirming daily care sheets will be maintained, a building will not be utilized until repairs completed, removing expired contact information, and that work orders have been submitted. The findings were classified as minor.
 - 2) **Approved via subcommittee – February 24, 2022**
- d) **KLCT & CMAT – Conducted March 3, 2022 (Members 1068, 1066 and 1078)**
 - 1) During this inspection approximately 23 individual locations were inspected and three findings were noted related to Cleaning/Environment, Expired – drugs/substances and Records – AUP. A corrective action and timetable for correction was established by the subcommittee, including: submitting an Amendment, discarding expired materials, and confirming area will not be used until repairs complete. The findings were classified as minor.
 - 2) **Approved via subcommittee – March 8, 2022**
- e) **PSYC – Conducted March 9, 2022 (Members 1039 and 1075)**
 - 1) During this inspection approximately 36 individual locations were inspected and four findings were noted related to Cleaning/Environment, Expired – drugs/substances, Expired – other, and Other. A corrective action and timetable for correction was established by the subcommittee, including: ensuring cardboard is removed, rescheduling an inspection time for a missed inspection, discarding expired materials, and updating cage cards. The findings were classified as minor.
 - 2) **Approved via subcommittee – March 11 & 13, 2022**

B. Guidance/SOP Document Review

1. The AWO Director explained that, due to the expansion of TAMU IACUC oversight to include the COD campus, all current guidance and SOP documents need to be updated to indicate the merger as of March 11, 2022 (new version). An example of the modifications to be performed to the form header and History sections of the documents was provided.
2. It was suggested that references to Dallas-specific instructions in the documents not be removed during the update as these references would be reviewed at the time of renewal.
3. The Chair asked for clarification regarding leaving the Dallas-specific portions of the text in place. The AWO Director explained that the TAMU IACUC did not review Dallas-specific aspects of the documents and may wish to adopt more widely or remove altogether during the next renewal. The Chair indicated this was acceptable.
4. **Approved (by majority vote):** Update of IACUC current Guidance and SOP documents to indicate merger of IACUCs

C. AUP Submissions

1. The Chair reminded IACUC members that any protocol or amendment can be called for full committee review by any member.
2. **2022-0006**
 - a) The protocol was called for full committee review for board input regarding the requirements and expectations for combined research and teaching protocols. The DMR was unable to attend the meeting but provided information regarding their review.

- b) The AV presented an overview of the AUP. It was noted that the ultimate purpose for specific samples taken was unclear in the text of the protocol. Samples were not specified as either related to teaching or research. The AV relayed the DMR's concerns regarding the cumulative use of individual animals. The DMR requested the IACUC weigh in on requirements and expectations for combined teaching and research protocols and noted that the protocol as written leaves vagaries for what is actually planned.

[1:01pm – Member 1067 exited]

- c) A member expressed that the protocol indicates that it includes a clinical trial, but the description of activities seems to describe only research activities.
- d) The AV recommended that a further description of research activities be requested, including the experimental design, justification of samples sizes, etc. Alternately, the PI may remove indications related to research and submit separate teaching and research protocols.
- e) **Requires Modification to Secure Approval (by majority vote); send to DMR (unanimous)**
 - 1) PI must provide a clear description of all animal activities, including research

3. 2021-0322

- a) The protocol was called for full committee review for committee input regarding the need for an animal use protocol.
- b) The AV presented an overview of the AUP and the planned activities using privately owned animals at the PI's residence. The PI indicated that the activities would not be performed on behalf of the university and that there was no affiliation with TAMU. The AV expressed concern that this activity is outside the oversight of the TAMU IACUC.
- c) A member mentioned that, if there is no affiliation with TAMU, then the results of the protocol must not be intended for publication.
- d) A member mentioned that some of the participants are graduate students and asked if the activities will be part of a dissertation project. The member asked about the requirements for activities if a graduate student, as a student of TAMU, is participating. The Chair explained that as long as the graduate students are participating in private events that are not a part of dissertation research and will not be published, an AUP is not required.
- e) Because of the species and work proposed, the AWO Director suggested that if the activities were a part of dissertation research, it would be best for the IACUC to withhold approval for the use of private animals and residence, and require that the activities take place in a TAMU facility with institutionally owned animals.
- f) **Approved by majority vote:** The AV will perform further investigation to confirm if activities require IACUC oversight (intended for publication/part of a dissertation)

[1:25 pm – Member 1074 exited]

D. Request for Programmatic Exception

1. 2022-001-E

- a) The committee reviewed a requested programmatic exception from water quality testing. It was noted that the facility does not regularly monitor dissolved oxygen or carbon dioxide as the animals are "hardy".
- b) A member mentioned that they would expect a proof of concept including measurements of dissolved oxygen to establish that the system consistently meets acceptable standards for water quality without need for regular testing. AWO staff responded that the facility provided previous measurements of dissolved oxygen that were consistently suitable for the species housed.

[1:28 pm – Member 1074 re-entered]

- c) A member asked about the water quality parameters named in TAMU-G-008 and mentioned that for saltwater systems, water hardness is not typically measured. The AWO Director explained that exceptions for saltwater systems could be granted on a protocol-specific basis or for a given facility.
- d) A member mentioned that the water turnover exchange rate is stated at 50% weekly and explained that the frequency and percentage may address concerns about oxygenation issues.
- e) The members discussed portions of the applicable guidance. The AWO Director explained that TAMU-G-008 would be up for review in April.

- f) It was suggested that the exception be brought back to the next IACUC meeting after consulting with members of appropriate expertise regarding necessary information.
- g) **Tabled** for IACUC revision and review at future meeting.

V. MEMBER TRAINING

A. Sharing and viewing other reviewer comments in iRIS

- 1. AWO staff presented a demonstration of sharing and viewing other reviewer comments in iRIS.

[All non-RCB visitors were asked to exit the meeting]

VI. POTENTIAL NON-COMPLIANCE/NON-COMPLIANCE UPDATES

A. 2021-018-NC

- 1. The board was notified that as a function of the expansion of oversight of the TAMU IACUC to the COD campus, an open noncompliance report, 2021-018-NC, would now be under the purview of the TAMU IACUC. AWO staff provided the board with information about the noncompliance and outstanding corrective actions.

[1:48pm – Member 1097 exited]

[1:55pm – Member 1090 exited]

- 2. It was suggested that outstanding procedural training be struck due to upcoming changes in animal facility requirements.
- 3. The committee noted that the PI and lab personnel have performed surgical and other anesthetic activities under observation to the satisfaction of the AV, and the AV recommended allowing the PI to resume autonomous procedures under anesthesia.

[2:05pm – Member 1099 exited]

[2:06pm – Member 1028 exited]

- 4. **Approved (by majority vote)**
 - a) Strike corrective action listed in 1.4.3
 - b) Allow resumption of autonomous procedures under anesthesia
 - c) Acceptance of completion of remaining corrective actions and closure of the noncompliance report

MEETING ADJOURNED at 2:08 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY – IACUC 1 (College Station, Dallas, Galveston)
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

April 21, 2022
MINUTES

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1053, 1096(A), 1091, 1076, 1067, 1046, 1052, 1068, 1079, 1093, 1100(A), 1039, 1071, 1075, 1069(A), 1077, 1098, 1028, 1066, 1051
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A), 1092(A)
VOTING MEMBERS ABSENT:	1040, 1062, 1049, 1059, 1082, 1004, 1085, 1089, 1097, 1011, 1016
ALTERNATE MEMBERS ABSENT:	1099, 1088, 1063, 1084, 1012, 1086, 1094, 1080, 1090, 1087
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Sr. Animal Activity Liaison, AWO; Assistant Director, AWO; Manager, RCB; Compliance Officer I, Texas A&M AgriLife Research; Senior Risk and Compliance Coordinator, Texas A&M Agrilife Research

CALL TO ORDER:

- The Meeting was formally called to order at 12:30 PM by the Chair. The meeting quorum is 16 members. Sixteen voting members were present when the meeting was called to order.

I. ANNOUNCEMENTS

- The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- Next IACUC meeting/Semiannual Program review**
 - The next IACUC meeting will take place at 12:30 PM, May 19th, 2022. The Semiannual Program Review will take place at this time. The Chair noted that the semiannual program review for IACUC 1 will now be conducted on a May/November schedule to accord with the previous SAPR schedule for the College of Dentistry campus.

[12:31pm – Member 1096, 1073, and 1098 entered]

C. Upcoming Inspections

- AWO staff will send an email to solicit volunteers for upcoming inspections.
- Upcoming Inspections; additional volunteers are welcome to participate
 - CVM Labs & Classrooms – May 3, 2022.** One volunteer is needed for this in-person inspection.
 - WFES – May 4, 2022.** One volunteer is needed for this in-person inspection.
 - TIGM – May 5, 2022.** Two volunteers are needed for this in-person inspection.
 - REYN – May 11, 2022.** Two volunteers are needed for this in-person inspection.

[12:32pm – Member 1100 entered]

D. New Materials

- The AWO Director presented members with materials developed by the PAM staff for PI use. These materials will be posted to the AWP Guidance page; members are encouraged to mention and share these resources with fellow researchers.
 - AWO-O-056 Tips for Self-Reporting to the IACUC
 - AWO-O-069 AUP Tool - Experimental Design and Timeline
 - AWO-O-073 AUP Tool - Tips for Combining AUPs

E. Continuing Education Opportunities for IACUC Members

- The AWO Director informed members of several upcoming or existing training opportunities. Members were encouraged to inform the AWO of any training completed for documentation of continuing education.
 - 9th Annual 3Rs Symposium: Collaboration to Improve Animal Welfare and Rigorous Results;**
 - June 22-24, 2022

- 2) virtual and in-person options (Please contact AWO regarding fee for virtual attendance)
- 3) <https://www.eventbrite.com/e/9th-annual-3rs-symposium-tickets-262571677957>
- b) **AWP Training: AUP Development and iRIS functionality**
 - 1) **Date/Time:** May 13, 2022; noon-1:00 pm
 - 2) **Description:** Training in how to develop a well written animal use protocol with specific emphasis on experimental design, procedures, observation and tracking of clinical signs, humane endpoints/early removal criteria. Will also include basic information on how to navigate iRIS and view the current version of the approved protocol. Relevant handouts will be provided to registrants such as IACUC Guidance and AWO supportive materials and sample documents. Includes opportunity for Q&A.
 - 3) **Registration (Zoom):**
<https://tamu.zoom.us/meeting/register/tJwsfuCgrT4rGNDRRRECMRnW5dcrWuGEUWDU>
- c) **AWP Training: Animal Welfare Program Expectations and Resources for Success**
 - 1) **Date/Time:** May 18, 2022; noon-1:30 pm
 - 2) **Description:** Overview of federal and institutional responsibilities when performing research with vertebrate animals, including a discussion of unanticipated adverse event reporting and avoidance of noncompliance. Hints and tips for success will be included. Relevant handouts will be provided to registrants such as IACUC Guidance and AWO supportive materials and sample documents. Includes opportunity for Q&A.
 - 3) **Registration (Zoom):**
<https://tamu.zoom.us/meeting/register/tJUkfuuvrjsqE93VfcOkRDJFHEpa4nmpZW2F>

II. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the March 24th, 2022 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. AWO staff reported that most inspection findings with an April due date were corrected; with a few exceptions presented to the board for review. Extension requests to IACUC determined timetables for correction were reviewed. It was noted that all were first time requests for extension:
 - a) PSYC – AWO staff requested a timetable for correction extension for the following findings as they are either waiting on a response from the PIs/lab personnel or a reinspection has been scheduled: removal of cardboard boxes (1 finding) and discarding expired materials (1 finding).
 - 1) Suggested timetable for correction extensions to May 19, 2022 and June 1, 2022.
 - b) **Approved (by majority vote):** Timetable extension for two requests.

[12:36pm – Member 1071 & 1069 entered]

C. Request for Programmatic Exception

1. 2022-001-E

- a) AWO provided an update on a programmatic exception from water quality testing. The PI has provided an updated husbandry SOP for IACUC review.
- b) The Chair asked if the SOP update addressed the previous concerns of the IACUC. AWO staff stated that some concerns had been addressed but suggested the IACUC review the updates to confirm.
- c) Members asked questions regarding the stated water turnover rates and test results. Members expressed concerns about the validity of previous test results.
- d) The AWO Director reminded members that the applicable guidance, TAMU-G-008, has been sent to members for review before renewal.
- e) Members mentioned that a lack of testing for the listed water qualities may result in a loss of scientific reproducibility.
- f) **Withhold Approval (by majority vote)**
 - 1) Approval withheld due to concerns of animal welfare and scientific rigor
 - 2) PI is asked to update SOP to include monitoring of nitrates, nitrites, sulfates, nitrogenous waste, chlorine, chloramines

D. Report on IACUC mandated AAALAC preparation

1. AWO PAM staff presented results from PI visits conducted in anticipation of the upcoming AAALAC site visit. Visits were focused on satellite locations where rodent surgeries are conducted.
2. Staff found surgical record-keeping inadequate in several locations and recommended the sharing of records reference tools and scheduling of outreach presentations.

III. NEW BUSINESS:

A. Facility Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facility approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction. Inspection results following subcommittee review were presented by AWO staff for the IACUC's information only.
 - a) **COD – Conducted March 21, 2022 (Members 1099, 1073, 1098, 1074, 1078, 1075)**
 - 1) During this inspection approximately 33 individual locations were inspected, and 16 findings were noted related to Expired – drugs/substances, Expired – Medical Supplies, Facility Repair & Function, Records – AUP and Other. A corrective action and timetable for correction was established by the committee including: submitting Amendments and/or VVCs, accepting corrective actions taken regarding discarding expired substances, confirming work orders have been submitted, providing confirmation/clarification, and rescheduling an inspection. The findings were classified as minor.
 - 2) A member explained that a number of PIs at the College of Dentistry have expressed concern regarding changes within the College.
 - 3) A member suggested that the AV perform a follow-up inspection on his next visit to complete the portion of the inspection that needs to be rescheduled. The AWO Director asked AWO staff to note that, though the full inspection was not completed, the location was viewed by inspectors.
 - 4) **Approved as written (by majority vote)** as indicated above
 - b) **Galveston – Conducted March 28, 2022 (Members 1073, 1074)**
 - 1) During this inspection approximately 9 individual locations were inspected and no findings were recorded. One note made during the inspection is that the emergency plan needs to be updated by July; however this is not a deficiency as it is currently acceptable.
 - 2) AWO staff noted that there are no USDA-covered species in the facility which would require updating of the emergency plan by the deadline indicated.
 - c) **College of Science (vehicle inspection)* – Conducted March 28, 2022 (Member 1078)**
 - 1) During this inspection one vehicle was inspected. No findings were noted on this inspection.
 - d) **SEBHC – Conducted April 4, 2022 (Member 1062)**
 - 1) During this inspection approximately 20 individual locations were inspected and six findings were noted related to Animal records – daily care, Cleaning/Environment, Expired – controlled substances, Records – AUP, and Records - Other.
 - 2) It was noted that a portion of this inspection was approved via subcommittee and a portion submitted for review by FCR.
 - 3) **Subcommittee (1062):** A corrective action plan and timetable for correction was established by the subcommittee, including the following: providing confirmation/clarification, updating SOPs, updating daily care sheet, and submitting an Amendment. The findings were classified as minor.
 - (a) **Approved via subcommittee – April 11, 2022**
 - 4) **FCR:** A corrective action plan and timetable for correction was established by the committee for a repeat finding: The IACUC Chair will send a letter to the PI regarding expired controlled substances. The PI should develop a drug log SOP to be submitted to the IACUC for review at the next meeting. Additionally, the PI should schedule a visit with PAM staff one month prior to the next IACUC inspection. The finding was classified as minor.
 - (a) **Approved as written (by majority vote)** as indicated above
 - e) **ARTF – Conducted April 5, 2022 (Member 1062)**
 - 1) During this inspection approximately 55 individual locations were inspected and one finding was noted related to Records - other. A corrective action and timetable for correction was established by

the subcommittee, including: updating housing location tracking. The finding was classified as minor.

2) **Approved via subcommittee – April 11, 2022**

f) **VMP* – Conducted April 6-7, 2022 (Member 1040, 1039)**

- 1) During this inspection approximately 247 individual locations were inspected, and nine findings were noted related to Expired – drugs/substances, Expired – feed, Expired – instruments/machines, Expired – Medical supplies, Improper/unclear/no label, Records – AUP, Records – Other, and Other. A corrective action and timetable for correction was established by the subcommittee, including: accepting facility actions regarding disposal of expired items, updating labels, posting signage, and submitting Amendments/VVCs. The findings were classified as minor.

2) **Approved via subcommittee – April 12, 2022**

g) **WEAC* – Conducted April 7, 2022 (Member 1039)**

- 1) During this inspection approximately 37 individual locations were inspected, and three findings were noted related to Expired – drugs/substances, Expired – instruments/machines, and Records - other. A corrective action and timetable for correction was established by the subcommittee, including: ensuring certification on vaporizer is accurate, and accepting the facilities actions regarding disposing of expired substances. The findings were classified as minor.

2) **Approved via subcommittee – April 11, 2022**

h) **CVM Large Animal Pastures & RELLIS Campus* – Conducted April 7, 2022 (Member 1067)**

- 1) During this inspection approximately 5 individual pastures were inspected, and no findings were noted.

i) **RSC* – Conducted April 7, 2022 (Member 1067)**

- 1) During this inspection approximately 43 individual locations were inspected, and nine findings were noted related to Cleaning/Environment, Expired – instruments/machines and Facility Repair & Function. A corrective action and timetable for correction was established by the committee, including: confirming actions taken regarding facility maintenance, marking an area “Not for Animal Use”, confirming vaporizer recertified prior to use and cleaning items. The findings were classified as minor.
- 2) AWO staff indicated there was confusion regarding whether the facility is still considered USDA regulated or not and confirmed that it is.
- 3) **Approved (by majority vote) – as indicated above**

j) **PRPV & MSTC – Conducted April 8, 2022 (Member 1096)**

- 1) During this inspection approximately 12 individual locations were inspected and no findings were noted.

B. Animal Concern

1. **2022-010-AC**

- a) The IACUC Chair performed an investigation into Animal Concern 2022-010-AC.
- b) The Chair indicated:
 - 1) An anonymous concern indicated a potential history of overcrowded cages in a specific PI’s animal colony.
 - 2) Investigation into this issue revealed that additional action is needed with CMP staff and the PI before this event is raised to the level of PI noncompliance.
 - 3) Suggested corrective actions:
 - (a) PI must provide an accurate list of contact information of lab personnel to CMP
 - (b) CMP will communicate overcrowded notices to the PI/lab staff and automatically separate overcrowded cages
 - (c) The AV should work with facility to ensure adequate space to separate cages
- c) **Approved (by majority vote)**
 - 1) Categorization: No findings
 - 2) Accept Chair’s suggested corrective actions and closure of the report

C. Semiannual Program Review Assignments

1. The Chair explained that, as stated, the SAPR will need to be performed in May 2022 in order to accord with the time period of review for former College of Dentistry IACUC.

2. Each member assigned to a section of the program review checklist for the January 2022 SAPR with a previous assignment will retain that assignment for the May 2022 SAPR.
3. AWO staff reminded members that they may volunteer to assist with any sections of the checklist.
4. The AWO Director added that the May 2022 SAPR would be held in-person on campus (with the opportunity for zoom attendance).

[1:48pm – Member 1053 exited]

IV. MEMBER TRAINING

A. IACUC Member Continuing Education: Noncompliance and the IACUC

1. AWO PAM staff provided a presentation on the principles of compliance and the identification, prevention, and IACUC approaches to noncompliance.

[1:53pm – Member 1100 exited]

[1:57pm – Member 1053 re-entered]

[All non-RCB visitors were asked to exit the meeting]

V. POTENTIAL NON-COMPLIANCE/NON-COMPLIANCE UPDATES

A. 2022-007-NC*

1. An investigative subcommittee appointed by the IACUC Chair performed an investigation into a potential non-compliance.
 - a) The subcommittee suggested the corrective action be creation and approval of a single AUP to include all ZEW club activities to ensure IACUC approval prior to the next course offering.
2. **Approved (by majority vote)**
 - a) Categorization: Findings with Noncompliance [Institutional]
 - b) Acceptance of subcommittee corrective action and closure of the noncompliance report

MEETING ADJOURNED at 2:19 pm; quorum was maintained for the entirety of the meeting.

TEXAS A&M UNIVERSITY – IACUC 1 (College Station, Dallas, Galveston)
INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

May 19, 2022
MINUTES

VOTING MEMBERS PRESENT:	Dr. Mark Westhusin (Chair), Dr. Robert Rose (AV), 1092(A), 1091, 1099(A), 1067, 1046, 1068, 1088(A), 1079, 1082, 1004, 1089, 1100(A), 1039, 1071, 1075, 1011, 1069(A), 1077, 1094(A), 1098, 1090(A), 1028, 1066, 1016
ALTERNATE MEMBERS PRESENT: (NON-VOTING)	1078(A)
VOTING MEMBERS ABSENT:	1053, 1040, 1062, 1049, 1076, 1059, 1052, 1093, 1085, 1097, 1051
ALTERNATE MEMBERS ABSENT:	1096, 1063, 1084, 1012, 1086, 1080, 1087
VISITORS PRESENT:	Coordinator, AWO; Coordinator, AWO; Coordinator, AWO; Sr. Animal Activity Liaison, AWO; Assistant Director, AWO; Manager, RCB; Associate Vice President, VPR

CALL TO ORDER:

- The Meeting was formally called to order at 12:33 PM by the Chair. The meeting quorum is 16 members. Twenty-three voting members were present when the meeting was called to order.

I. INTRODUCTIONS

- A. The Chair introduced the Associate Vice President for Research. The Associate Vice President remarked on the hard work of committee members and AWO staff, and thanked individuals for their time and efforts on behalf of the university.

II. ANNOUNCEMENTS

- A. The Chair reminded the committee and guests that items discussed during the meeting should be considered confidential. Attendees were also notified that the meeting proceedings were being recorded, and that the recording would be deleted after generation of the meeting minutes.
- B. **Next IACUC meeting**
- The next IACUC meeting will take place at 12:30 PM, June 16th, 2022. The meeting will be held in person and via zoom.
- C. **Upcoming Inspections**
- AWO staff will send an email to solicit volunteers for upcoming inspections.
 - Upcoming Inspections; additional volunteers are welcome to participate
 - MREB Labs Part 1 – June 7, 2022.** Two volunteers are needed for this in-person inspection.
 - MREB Vivarium – June 8, 2022.** Two volunteers are needed for this in-person inspection.
 - MREB Labs Part 2 – June 9, 2022.** Two volunteers are needed for this in-person inspection.
 - MREB ABSL3* – TBD.** One volunteer is needed for this in-person inspection.
 - Misc. facilities – June 14, 2022.** One volunteer is needed for this in-person inspection.
 - GHRC* – June 15, 2022.** One volunteer is needed for this in-person inspection.
- D. **New Materials**
- The AWO Director presented members with materials developed by the PAM staff for PI use. These materials will be posted to the AWP Guidance page; members are encouraged to mention and share these resources with fellow researchers.
 - AWO-O-072 AUP Tool – ERC Worksheet
 - AWO-C-019a – Inspection Self Evaluation – PI labs
- E. **Continuing Education Opportunities for IACUC Members**
- The AWO Director informed members of several upcoming or existing training opportunities. Members were encouraged to inform the AWO of any training completed for documentation of continuing education.
 - OLAW Webinar: Animal Welfare in High Containment or Barrier Facilities: Addressing Unique Challenges

* Denotes USDA regulated

- 1) 12-1 pm, June 9, 2022
- 2) <https://olaw.nih.gov/education/educational-resources/webinar-2022-06-09.htm>

III. OLD BUSINESS:

A. Review of Minutes

1. The Committee reviewed the minutes from the April 21st, 2022 IACUC meeting.
2. **Approved (by majority vote):** As written; no additional modifications required

B. Update on Semiannual Facility Inspection Deficiencies

1. AWO staff reported that most inspection findings with a May 2022 due date were corrected, with a few exceptions presented to the board for review. Extension requests to IACUC determined timetables for correction were reviewed.
 - a) COD – AWO staff requested a timetable for correction extension for the following findings as they will be addressed with a scheduled renovation and do not impact animal welfare: peeling paint and cracks (2 findings)
 - b) RSC – AWO staff requested a timetable for correction extension for the following findings as they are waiting on a response from the PIs/lab personnel: removal of cardboard boxes/cleaning (2 findings), addressing insulation/facility issues (3 findings), removing plant overgrowth (2 findings), and posting signage (1 finding).
 - 1) Suggested timetable for correction extensions to June 17, 2022.
 - c) **Approved (by majority vote):** Timetable extension for two requests.

IV. NEW BUSINESS I:

A. Facility Inspection Reports

1. In accordance with approved SOP TAMU-S-010, the IACUC may use alternative mechanisms to approve inspection findings, such as a subcommittee. For some of the following results (as indicated), a subcommittee composed of the IACUC inspectors for the recently inspected facility approved the classifications of each deficiency (as minor or significant), established corrective action plans (if not already addressed) and established timetables for correction. Inspection results following subcommittee review were presented by AWO staff for the IACUC's information only.
 - a) **EQNR/Free/EQCT/Horse Center – Conducted April 11, 2022 (Member 1075)**
 - 1) During this inspection approximately 247 individual locations were inspected, and 7 findings were noted related to Cleaning/Environment, Expired – drugs/substances, Facility Repair & Function, Improper sharps use, and Primary Enclosure. A corrective action and timetable for correction was established by the subcommittee, including: cleaning area/item, confirming actions, discarding expired materials, and repairing/replacing facility issues. The findings were classified as minor.
 - 2) **Approved via subcommittee – April 28, 2022**
 - b) **PMC/Polo – Conducted April 12, 2022 (Members 1091, 1078)**
 - 1) During this inspection approximately 36 individual locations were inspected and two findings were noted related to Facility Repair & Function, and Improper storage – food/water. A corrective action and timetable for correction was established by the subcommittee, including: confirming actions, repairing/replacing facility issues, and storing drug/item appropriately. The findings were classified as minor.
 - 2) **Approved via subcommittee – April 28, 2022**
 - c) **TIPS* – Conducted April 18, 2022 (Members 1079)**
 - 1) During this inspection approximately 64 individual locations were inspected and three findings were noted related to Expired – instruments/machines and Facility Repair & Function.
 - 2) It was noted that a portion of this inspection was approved via subcommittee and a portion submitted for review by FCR.
 - 3) **Subcommittee (1079):** A corrective action plan and timetable for correction was established by the subcommittee, including the following: providing confirmation/clarification, updating SOPs, updating daily care sheet, and submitting an Amendment. The finding was classified as minor.
 - (a) **Approved via subcommittee – April 28, 2022**

- 4) **FCR:** A corrective action plan and timetable for correction was established by the committee including: Confirming rooms will not be utilized for live animal activities prior to construction completion with a timetable for correction of June 16, 2022 (2 findings). The findings were classified as minor.
 - (a) **Approved as written (by majority vote)** as indicated above
- d) **ASTREC – Conducted April 19, 2022 (Member 1091)**
 - 1) During this inspection approximately 224 individual locations were inspected and 11 findings were noted related to Animal records – daily care, Cleaning/Environment, Expired – drugs/substances, Expired instruments/machines, Facility Repair & Function, Improper storage – food/water, Improper/unclear/no label, and Training.
 - 2) It was noted that a portion of this inspection was approved via subcommittee and a portion submitted for review by FCR.
 - 3) A member asked if the vaporizer certification was out of date at the time of inspection. AWO staff responded that the certification sticker was out of date but facility personnel believed that a new sticker had not been affixed during last certification.
 - 4) **Subcommittee (1051):** A corrective action plan and timetable for correction was established by the subcommittee, including the following: discarding expired materials and confirming actions. The findings were classified as minor.
 - (a) **Approved via subcommittee – May 2, 2022**
 - 5) **FCR:** A corrective action plan and timetable for correction was established by the committee for seven findings including: addressing facility issues (2 findings), confirming vaporizer is certified, feed stored appropriately, updating or developing documentation (2 findings), and discarding expired materials with a timetable for correction of June 16, 2022. The findings were classified as minor.
 - (a) **Approved as written (by majority vote)** as indicated above
- e) **CVM-L* – Conducted April 20, 2022 (Member 1067)**
 - 1) During this inspection approximately 105 individual locations were inspected, and one finding was noted related to Records - other. A corrective action and timetable for correction was established by the committee, including: updating a record. The finding was classified as minor.
 - 2) **Approved (by majority vote)** – as indicated above
- f) **CVM-S* – Conducted April 22, 2022 (Member 1040)**
 - 1) During this inspection approximately 46 individual locations were inspected, and two findings were noted related to Cleaning/Environment and Expired – Medical Supplies. A corrective action and timetable for correction was established by the subcommittee, including: submitting a work order and disposing of expired substances. The findings were classified as minor.
 - 2) **Approved via subcommittee – May 8, 2022**
- g) **EQHSA – Conducted April 16, 2022 (Member 1078)**
 - 1) During this inspection approximately 18 individual locations were inspected. No findings were noted on this inspection.
- h) **CVM Labs – Conducted May 3, 2022 (Member 1087)**
 - 1) During this inspection approximately 20 individual locations were inspected, and one finding was noted related to Cleaning/Environment. A corrective action and timetable for correction was established by the subcommittee, including: confirming an area will be cleaned prior to use. The findings were classified as minor.
 - 2) **Approved via subcommittee – May 6, 2022**
- i) **TIGM – Conducted May 5, 2022 (Members 1039, 1040)**
 - 1) During this inspection approximately 40 individual locations were inspected, and 11 findings were noted related to Animal records – daily care, Animal records – surgery, Cleaning/Environment, EHS – human safety, Expired – instruments/machines, Facility Repair & Function, Improper/unclear/no label, Records – controlled substances, Records – Other, and Other. A corrective action and timetable for correction was established by the subcommittee, including: recertifying equipment (3 findings), updating documentation/records (4 findings), discarding expired materials (2 findings),

providing clarification (1 finding) and submitting a work order (1 finding). The findings were classified as minor.

2) **Approved via subcommittee – May 9, 2022**

[12:49pm – Member 1100 entered]

j) **WFES – Conducted May 4, 2022 (Member 1078)**

- 1) During this inspection three individual locations were inspected, and two findings were noted related to Expired – drugs/substances. A corrective action and timetable for correction was established by the subcommittee, including: disposing of expired substances. The findings were classified as minor.

2) **Approved via subcommittee – May 9, 2022**

V. REQUEST FOR PROGRAMMATIC EXCEPTION

A. 2022-001-E

1. AWO provided an update on a requested programmatic exception from water quality testing. The PI requested the opportunity to speak with the IACUC regarding the TAMU-G-008.
2. The PI previously requested an exception from some of the water quality records and testing.
3. The AWO director explained that the last version of guidance TAMU-G-008 sent to members included a number of edits and additions; including a new portion which states that the PI must include specific measures in their aquatic husbandry SOP taken to ensure water quality based on their specific system.
4. A member asked about the difficulty of the tests required by TAMU-G-008. AWO staff replied that the tests discussed were simple and inexpensive.
5. AWO staff provided an overview of the current draft of TAMU-G-008. The AWO Director pointed out several instances of changes which accord the flexibility requested by the PI based on the type of system used.
6. The PI was provided time to speak. The PI expressed concerns regarding the lack of clarity or consistency in industry standards for water quality testing.

[1:01pm – Member 1098 entered]

7. An IACUC member presented the PI with changes to the TAMU-G-008 which would correspond with his comments and concerns.
8. The IACUC Chair thanked the PI for his information and attendance.
9. The IACUC Chair suggested an immediate vote on the approval of revisions to TAMU-G-008.
10. An IACUC member expressed their support for general regular testing with consideration of testing parameters specific to species and given systems. The IACUC member explained that the consistent record of testing is important for diagnosis of animal health concerns and system issues.
11. The AWO Director explained that the approval of revisions to TAMU-G-008 would render 2022-001-E unnecessary.
12. **Close Request - No further action taken.**

VI. GUIDANCE DOCUMENT REVIEW

A. TAMU-G-008 Guidelines on Working with Zebrafish

1. The IACUC discussed suggested modifications to the guidance document as part of the discussion regarding the request for programmatic exception described in section V of these minutes.
2. **Approved as revised (by majority vote)**

VII. NEW BUSINESS II:

A. Adverse events

1. **2022-008-AE**

- a) A subcommittee appointed by the IACUC Chair performed an investigation into Adverse Event 2022-008-AE. A member of the subcommittee presented the findings to the IACUC for review:
 - 1) An animal experienced a systemic reaction to a regular medical treatment and a mortality event occurred. A necropsy performed indicated no obvious cause of death.
 - 2) The compound administered has been submitted for contaminant analysis, but no other animals treated with the same compound have been affected.
 - 3) A member of the staff involved in the adverse event was not listed as a participant on the AUP

- 4) Suggested corrective actions:
 - (a) Staff member should be added to AUP listed personnel
- b) **Approved (by majority vote)**
 - 1) Categorization: Findings with potential noncompliance [institutional]
 - 2) Accept subcommittee's suggested corrective actions and closure of the report

B. Animal Concerns

1. 2022-004-AC

- a) The IACUC Chair performed an investigation into Animal Concern 2022-004-AE. The AV presented the findings on behalf of the IACUC Chair to the IACUC for review:
 - 1) Lab personnel indicated an animal concern regarding missing water bottles from several cages of animals.
 - 2) Investigation revealed that communication issues between lab group and animal care group were the root cause for this issue.
 - 3) Suggested corrective actions:
 - (a) Retraining for husbandry staff
 - (b) CMP staff to schedule a meeting with PI/lab to open lines of communication between the two groups.
- b) **Approved (by majority vote)**
 - 1) Categorization: Findings without Noncompliance
 - 2) Accept Chair's suggested corrective actions and closure of the report

[1:25pm – Member 1046 exited]

2. 2022-012-AC*

- a) The IACUC Chair appointed an investigative subcommittee to investigate Animal Concern 2022-012-AC. A member of the subcommittee presented the findings to the IACUC for review:
 - 1) An anonymous concern was submitted regarding an issue that occurred during euthanasia procedures performed on exotic hoof stock.
 - 2) Investigation into this issue revealed that the issues noted in the concern were not unanticipated due to the untamed nature of the animals.
 - 3) Suggested corrective actions:
 - a) Prior to future euthanasia events, the clinical veterinarian will meet with staff/researchers to explain the procedure and ensure all individuals are trained to be available to assist if needed.
- b) **Approved (by majority vote)**
 - 1) Categorization: Findings without potential noncompliance
 - 2) Accept subcommittee's suggested corrective actions and closure of the report

[1:33pm – Member 1046 re-entered]

[1:33pm – The Chair declared a break until 1:44pm]

[1:43pm – Member 1082 exited]

VIII. Semiannual Program Review

A. Outstanding items from the January 2021 SAPR

1. AWO staff presented updates to program review checklist findings from the January 2022 SAPR and suggested an extension of the timelines for correction due to the change in SAPR date from July to May.
2. Items 1 & 2: Disaster Planning and Emergency Preparedness
 - a) Corrective action: Make applicable updates to the institutional disaster plan.
 - b) Suggested extension of timeline for correction to November 30, 2022.
3. **Approved (by majority vote):** as indicated above.

B. College of Dentistry Overview

1. The AWO Director provided an overview of the College of Dentistry animal program including number of PIs and AUPs, areas of research emphasis, and a description of vivaria and research facilities. Members were encouraged to attend an inspection.
2. An IACUC member from the College of Dentistry mentioned that the facility is scheduled for major renovations in the upcoming three years.

3. The Associate VPR thanked the new IACUC members from the College of Dentistry for joining the TAMU 1 IACUC.

C. Program Review Checklist

1. Members presented their evaluations of specific portions of the checklist. The Chair reminded members to limit their comments to those pertaining to findings or those items which require discussion. The Board classified each deficiency identified as minor or significant (all minor), established corrective action plans and established timetables for correction:
 - a) Section I.A.1: Animal Care and Use Program – all items received evaluations of Acceptable.
 - b) Section I.A.2: Disaster Planning and Emergency Preparedness – all items received evaluations of Acceptable.
 - c) Section I.A.3: IACUC - all items received evaluations of Acceptable.
 - d) Section I.A.4: IACUC Protocol Review – Special Considerations – all items received evaluations of Acceptable.
 - e) Section I.A.5: IACUC Membership and Functions - all items received evaluations of Acceptable.
 - f) Section I.A.6: IACUC Training - all items received evaluations of Acceptable.
 - g) Section I.A.7: IACUC Records and Reporting Requirements - all items received evaluations of Acceptable.
 - h) Section I.A.8: Veterinary Care - all items received evaluations of Acceptable.
 - i) Section I.A.9: Personnel Qualifications and Training - all items received evaluations of Acceptable.
 - j) Section I.A.10: Occupational Health and Safety of Personnel - all items received evaluations of Acceptable.
 - k) Section I.A.11: Personnel Security - all items received evaluations of Acceptable.
 - l) Section I.A.12: Investigating & Reporting Animal Welfare Concerns - all items received evaluations of Acceptable.
 - m) Section I.B.1: Clinical Care and Management - all items received evaluations of Acceptable.
 - n) Section I.B.2: Animal Procurement and Transportation/Preventative Medicine - all items received evaluations of Acceptable or Not Applicable.
 - 1) The member performing the review commented that item 2d is not applicable as TAMU does not use or purchase random-sourced dogs and cats.
 - o) Section I.B.3: Surgery - all items received evaluations of Acceptable.
 - p) Section I.B.4: Pain, Distress, Anesthesia, and Analgesia – the following items received evaluation findings of minor, with all other items receiving an evaluation of Acceptable:
 - 1) Item I.B.4g: IACUC Guidance TAMU-G-002 includes the term “muscle relaxant” used interchangeably with the term “muscular blocking agent”. It was also noted that TAMU-G-002 also references IACUC Guidance TAMU-G-011, for which the website link is not functional.
 - 2) The IACUC approved corrective actions for this item to include:
 - (a) Strike “muscle relaxants or” from section 5.5.7 of IACUC Guidance TAMU-G-002.
 - (b) Repair DOR website link for IACUC Guidance TAMU-G-011.
 - (c) The IACUC approved a timeline for correction of November 30, 2022.
 - q) Section I.B.5: Euthanasia - all items received evaluations of Acceptable.
 - r) Section I.B.6: Drug Storage and Control - all items received evaluations of Acceptable.
 - s) **Approved (by majority vote):** as indicated above.

D. Departures and Exceptions Checklist

1. A member of the AWO staff presented a list of Departures from the *Guide* and Exceptions from the AWR approved by the IACUC for use in animals since the last SAPR.
 - a) The AWO Director explained that, as a part of the recent renewal for the TAMU OLAW assurance, the IACUC was instructed to include the justifications for exceptions as stated in the individual protocols, rather than a summary as previously provided.

[2:11pm – Member 1077 exited]

- b) IACUC members discussed the expectations of identifying exceptions to the *Guide* based on IACUC approval.

[2:15pm – Member 1011 exited]

E. Programmatic Changes Approved Since Last SAPR

1. A member of the AWO staff presented a list of programmatic changes implemented since the last SAPR; including changes in membership, the expansion of board oversight to animal activities at the TAMU College of Dentistry (COD) in Dallas, and the approval of one new IACUC guidance document.

F. Program Metrics

1. An AWO staff member presented the program metrics for submissions since the January 2022 SAPR until now. It was noted that comparison data was not included, as the current time period included only four (4) months, while previous SAPRs included six (6) months of submissions.
2. An AWO staff member presented the program metrics related to IACUC inspections findings.

[2:23pm – Member 1016 exited]

3. An AWO staff member presented the program metrics related to reportable events. In the past four (4) months, the program has had eight adverse events, three animal concerns, and two noncompliance events.
 - a) The AWO Director mentioned an increase in animal concerns and noncompliance events from the previous SAPR period.
4. AWO staff members presented metrics related to the PAM program. 32 PAM reviews were conducted since last SAPR resulting in 3 findings and 226 SFIs. PAM performed one department outreach event and 18 PI assistance activities.

[2:30pm – Member 1091 entered]

- a) AWO staff draw attention to the 22% response rate for 1st anniversary PAM notifications.
- b) An IACUC member asked if responses to PAM audits were required. The AWO Director replied that staff limitations make compulsory not-for-cause PAM visits prohibitive at this time. It was also noted that the actual number of PAM audits performed exceeds standards established by the IACUC in the applicable SOP.

MEETING ADJOURNED at 2:34 pm; quorum was maintained for the entirety of the meeting.