Annual Report to OLAW

| Institution: University of Texas Health Science Center at San Antonio |
|---|
| Assurance Number: D16-00224 (A-3345-01) |
| Reporting Period: October 1, 2020 – September 30, 2021 |

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

| | I. | Program | Changes | Select A | or B |
|--|----|----------------|---------|----------|------|
|--|----|----------------|---------|----------|------|

| [🗌] A. | There have been no changes in this institution's program for animal care and use as |
|----------|--|
| | described in the Assurance. [Skip to Item II.] |
| r 🖂 ı n | |

| [🖂] B. | Change(s) in this institution | 's program for anim | ial care and | d use as o | described ir | າ the Assurance |
|----------|-------------------------------|---------------------|--------------|------------|--------------|-----------------|
| | have occurred during this re | porting period. | | | | |

Select all that apply:

| [🗌] | This institution's AAALAC accreditation status has changed (PHS Policy IV.A.2.). |
|-------|--|
| | [] AAALAC Accredited – Category 1 |
| | [□] Non-Accredited – Category 2 |

- [\boxtimes] This institution's program for animal care and use has changed (<u>PHS Policy IV.A.1.a-i.</u>). [Attach a full description of the changes.]
- [\boxtimes] The individual designated by this institution as the Institutional Official has changed. [Provide name, title(s), address, e-mail, phone, and fax numbers in Item V.]
- [\(\)] The membership of this institution's IACUC has changed. [Provide current roster of members in Item VI.]

II. Semiannual Evaluations

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

A. Program Evaluations

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

| Date 1: March 17, 2021 | Date 2: September 22, 2021 |
|------------------------|----------------------------|
|------------------------|----------------------------|

B. Facility Inspections

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

| Date 1: October 15, 29, 2020 | Date 2: November 19, 24, 2020 |
|--|---------------------------------|
| Date 3: December 1,8, 9, 14, 2020 | Date 4: January 6, 21, 2021 |
| Date 5: February 25, 2021 | Date 6: March 18, 2021 |
| Date 7: April 7, 2021 | Date 8: May 20, 28, 2021 |
| Date 9: June 2, 9, 17, 22, 24, 2021 | Date 10: July 1, 15, 2021 |
| Date 11: August 12, 19, 23, 25, 26, 2021 | Date 12: September 16, 30, 2021 |

III. Minority Views [Select A or B]

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

IV. Signatures

| IACUC Chairperson | Institutional Official | | |
|--------------------------------------|---|--|--|
| Name: Kristine Vogel, Ph.D. | Name: Jennifer Sharpe Potter, Ph.D., M.P.H. | | |
| Signature: (b) (6) Date: 11/16/2021 | Signature: (b) (6) Date: 11/16/2021 | | |

V. Change in Institutional Official

| Name: Jennifer Sharpe Potter | | | | |
|---|-----------------------------------|--|--|--|
| Title: Interim Vice President for Research | Degree/Credentials: Ph.D., M.P.H. | | | |
| Name of Institution: University of Texas Health Science Center at San Antonio | | | | |
| Address: [street, city, state, zip code] | | | | |
| 7703 Floyd Curl Drive | | | | |
| San Antonio, Texas 78229-3900 | | | | |
| | | | | |
| Phone: (b) (6) | Fax: | | | |
| E-mail: potterjs@uthscsa.edu | | | | |

VI. Change in IACUC Membership [Current roster]

| IACUC Contact Inform | • | Science Center at Sa | |
|--------------------------------------|------------------------|---|--|
| Address: [street, city, st | | | |
| 7703 Floyd Curl Drive | ,,, | | |
| San Antonio, Texas 782 | 29-3900 | | |
| E-mail: (b) (6) @uthso | <u>sa.edu</u> | | |
| Phone: (b) (6) | | Fax: | |
| IACUC Chairperson | | | |
| Name: Kristine Vogel | | | |
| Title: Associate Professo | r | Degree/Creden | tials: Ph.D. |
| PHS Policy Membership | Requirements***: | | |
| IACUC Roster [Provide | below or attach] | | |
| Name of Member/ Code [*] | Degree/ Credentials | Position Title/ Occupational Background** | PHS Policy Membership Requirements*** |
| | | | Member - Safety/Occupational Health (Primary) Member - Safety/Occupational Health (Alternate) |
| | | | Non-voting - TBRI Liaison |
| | | | Member - Safety/Occupational Health (Alternate) |
| | | | Non-voting - VA Liaison |
| | | | Member - IACP(Alternate) |
| | | | Scientist (Alternate) |
| | | | Veterinarian (Alternate) |
| | | | Veterinarian (Primary) |
| | | | Non-Scientist (Primary) |
| | | | Scientist (Alternate) |
| | | | Veterinarian (Primary) |
| | | | Scientist (Primary) |
| | | | Scientist (Alternate) |
| | | | Scientist (Primary) |
| | | | Scientist (Alternate) |

| | | (b) (6) | Scientist (Alternate) |
|-----------------|-------|---------------------|---|
| | | | Scientist (Primary) |
| | | | Member – Safety/Occupational Health (Alternate) |
| | | | Scientist (Alternate) |
| | | | Scientist (Primary) |
| | | | Scientist (Primary) |
| | | | Scientist (Primary) |
| | | | Scientist (Alternate), Vice Chair |
| | | | Scientist (Alternate) |
| | | | Scientist (Alternate) |
| | | | Scientist (Alternate) |
| | | | Member - IACP (Alternate) |
| | | | Scientist (Primary) |
| | | | Scientist (Primary) |
| | | | Non-Affiliated Member, (Primary) |
| | | | Non-Voting - DLAR |
| | | | Member - IACP (Alternate) |
| | | | Member - IACP (Alternate) |
| | | | Member - IACP (Primary) |
| | | | Scientist (Primary) |
| | | | Scientist (Alternate) |
| Vogel, Kristine | Ph.D. | Assistant Professor | Scientist (Primary); Chair |
| | | (b) (6) | Non-Scientist (Alternate) |
| | | | Non-Voting – UTHSCSA Police |
| | | | Scientist (Alternate) |

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

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

^{***} PHS Policy Membership Requirements:

Veterinarian veterinarian with training or experience in laboratory animal science and

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

at the institution.

Scientist practicing scientist experienced in research involving animals.

Nonscientist member whose primary concerns are in a nonscientific area (e.g., ethicist,

lawyer, member of the clergy).

Nonaffiliated individual who is not affiliated with the institution in any way other than as a

member of the IACUC and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user or former user. A consulting veterinarian may

not be considered nonaffiliated.

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

Statement of Burden

Public reporting burden for this collection of information is estimated to average 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0765). Do not return the completed form to this address.



Institutional Animal Care and Use Program Changes November 2021

The following is a summary of changes made to the Institution's Animal Welfare Assurance for the period of October 1, 2020 – September 30, 2021.

| period of October 1, 2020 – September 30, 2021. |
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| <u>Subsection III.B</u> The qualifications, authority and percent of time contributed by the veterinarian(s) who will participate in the program are as follows: |
| Summary of Change: (b) (6) |
| <u>Subsection VII.A – Authorized Institutional Official</u> |
| Summary of Change: The Institutional Official has changed from Sharpe Potter, PhD, MPH; Interim Vice President for Research/Institutional Official. Dr. Potter is acting officially in an authorized capacity on behalf of the UTHSCSA and with an understanding of the Institution's responsibilities under the Assurance. |
| Subsection VIII. – IACUC Roster: |
| <u>Summary of change:</u> An updated IACUC Roster was included in the Assurance document, consistent with the roster that was included in the Annual Report form. |
| The following members were removed from the roster: |
| (b) (6) |
| The following members were added to the roster: |
| (b) (6) |