

Date: 25 July 2021

## ARIZONA STATE UNIVERSITY IACUC ANNUAL REVIEW

### I. Currently approved protocol

Protocol Number: 20-1737R RFC 1  
 Protocol Title: Genomic Analysis of Baja California Vertebrates  
 Principal Investigator: [REDACTED]  
☒ Funded ☐ Unfunded

### II. Status of Project

#### A. Were the animal activities conducted?

- i. ☒ **Yes, they were conducted.** If yes,
1. Were there any significant animal welfare issues (morbidity or mortality, complications, etc.) encountered over the past 12 months?
    - a. ☒ **Yes. Describe (include the problem, approximate number of animals affected, and resolution):**  
 (A) One rodent individual (*Dipodomys simulans*) became hypothermic when trapped in the night following a cold rain and extremely dense fog. When discovered in the early morning, we dried the individual with a clean cloth and warmed it with body heat near a fire and used a portable fan to create a warm wind to finish drying its fur. We have not encountered this issue since, but we plan to bring plastic or cardboard sheets to cover the traps to prevent the animal from being rained on and increase the use of batting when rain/fog is anticipated.  
 (B) A lizard *Urosaurus nigricaudus* individual suffered a head/ocular injury during capture and died prior to our ability to euthanize it. The specimen was preserved in RNA later and will be used as part of the study. We discussed the incident and capture that led to the fatality and reviewed the proper technique and pressure to apply when capturing individuals.
    - b. ☐ No. Proceed to item II B.
  2. Were all unanticipated welfare issues reported?
    - a. ☐ Yes. Proceed to item II B.
    - b. ☒ No. Describe. Proceed to item II B when completed.  
 We did not realize that fatalities should be reported immediately following the event and not at end-of-year review. In the future we will report any incidents if/when they happen.
- ii. ☐ **No, they were not conducted.** If the protocol will be terminated, complete the Final Review form.
1. If the protocol will remain active, why were animal activities not conducted?

Proceed to Section II B.

#### B. Have there been any recent findings, either from this study or a related study that would change the planned use of animals?

- Species Used
- Animal Numbers
- Procedures
- Criteria to Measure/Monitor Pain or Distress
- Alternatives to Painful Procedures

- Restraint
- Amelioration and Control of Painful Procedures
- Estimation of Potential Postoperative/Intervention Pain
- Preoperative/Postoperative/Chronic Care
- Euthanasia/Disposition of Animals
- Animal Care and/or Use Sites

- i. ☐ Yes. Complete a separate [Request for Changes](#) form describing all proposed changes as well as the scientific rationale for these changes. Proceed to item III.
- ii. ☒ No. Proceed to item III.

### III. Updated Information

A. Did the pain status stated on the protocol remain appropriate for the procedures performed?

- i. ☒ Yes. Proceed to item III B.
- ii. ☐ No. If no, please describe: Proceed to item III B when completed.

B. Has there been new funding added to the project?

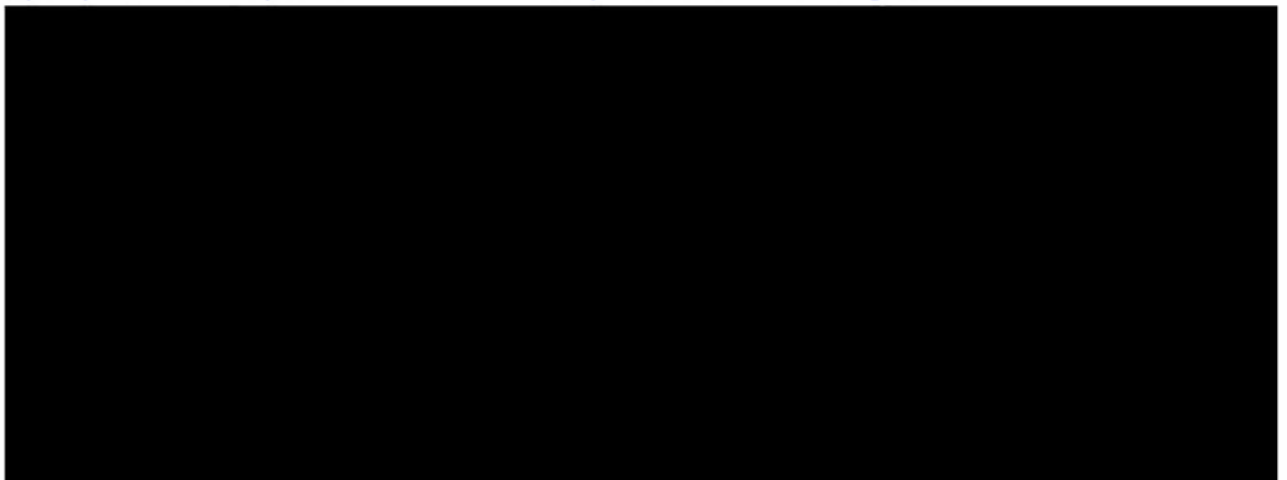
- i. ☐ Yes. Provide new grant(s) information:  
 Granting Agency:  
 Title:  
 ASU Proposal or Award number:

☒ No.

### IV. Progress Report (for research or teaching protocols only)

Provide a statement on progress under this protocol over the past 12 months. Include any presentations or publications that have resulted from this protocol during the past 12 months.

Due to Covid-19 delays, we conducted our first field sampling in April of 2021 and so do not have results to report yet. However, aspects of this work have been presented at the following venues:



### V. Personnel

All personnel who work with animals are required to have animal care training within the last four years. ASU IACUC training modules can be completed at [https://asu.co1.qualtrics.com/ife/form/SV\\_b2b2XRXRrs1309f](https://asu.co1.qualtrics.com/ife/form/SV_b2b2XRXRrs1309f). Personnel are required to have Level III training certification on file with the IACUC office in order to perform

procedures independently (without supervision). See the IACUC web site (<https://researchintegrity.asu.edu/animals/training>) for more information on training and Level III forms.

**\* Procedures other than husbandry, handling, or behavioral testing MUST be performed under supervision unless the person is Level III certified to conduct the procedure independently. Personnel are not Level III certified until the IACUC has reviewed and approved the Level III training documentation. The PI is responsible for ensuring that personnel who are not Level III certified are supervised at all times.**

A. List the names, titles, affiliations, and roles of **ALL** persons currently involved in the research or teaching activity.

| Name       | Title            | ASURITE name | Role in Protocol   |   | Species with which individual will have direct contact ("none" "all" or list species) | FOR IACUC USE ONLY<br><br>Training Confirmation                          |
|------------|------------------|--------------|--|---|---|--|
|            |                  |              | What activities will each person perform on live animals <b>ONLY</b> while under direct supervision? | What activities will each person be allowed to perform independently (including appropriate Level 3 certification*) at the time of protocol submission? |   |  |
| [REDACTED] | PI               | [REDACTED]   | all  | all   | all   | 8/2019<br>OHSP   |
| [REDACTED] | Co-PI            | [REDACTED]   | all  | all   | all   | Basic 2/2021<br>Rodents 8/2021<br>Wildlife 8/2019<br>OHSP                |
| [REDACTED] | Faculty          | [REDACTED]   | all  | all   | all   | 1/2020<br>Basics 8/2019<br>OHSP  |
| [REDACTED] | Graduate Student | [REDACTED]   | all  | all   | all   | Amphibians/Reptiles & Basics 8/2018<br>Rodents & Wildlife 8/2019<br>OHSP |
| [REDACTED] | Graduate Student | [REDACTED]   | all  | all   | all   | Amphibians/Reptiles & Basics 1/2020<br>Rodent & Wildlife 2/2020<br>OHSP  |
| [REDACTED] | Graduate Student | [REDACTED]   | All  | None  | all   | 8/2021<br>OHSP   |

**\*\* Please note that we are requesting to switch the PI/Co-PI roles for this project. The existing PI is [REDACTED] we would like [REDACTED] to be Co-PI and [REDACTED] to be PI on the renewal to match the PI/Co-PI on the NSF grant.**

B. If any of the above listed personnel are new to the protocol, describe their years of experience with all listed species and procedures they will be conducting under this protocol. For procedures for which they are not yet trained, but will likely be trained to do during the activity period of this protocol, provide a description of who will provide such training:

[REDACTED] is new to this protocol. [REDACTED] is an incoming graduate student arriving in August 2021, and has prior handling experience of reptiles. He will also be trained by [REDACTED] and [REDACTED] or other DACT personnel prior to handling any animals related to this protocol.

Revised 3/25/2021

Obtained by Rise for Animals.

Uploaded to Animal Research Laboratory Overview (ARLO) on 08/15/2023

PRR22-11\_0798

- C. List the names of any individuals no longer involved with the research (these individuals will be removed from the protocol and DACT will be notified):

[REDACTED] graduated and is no longer involved in this research.

**VI. Certification**

By signing this report, I certify that, to the best of my knowledge, the information included herein is accurate and complete. I understand that continued animal use past the scheduled termination date of the protocol requires IACUC approval. I also understand that should the animal use under this protocol require ANY change from that stated in the protocol, prior approval by the IACUC is required.

[REDACTED]

Principal Investigator's Signature

July 26, 2021  
Date

[REDACTED]

Principal Investigator's Signature

JULY 26, 2021  
Date

**FOR IACUC USE ONLY**  
**Annual Review Determination**

ANNUAL REVIEW APPROVAL SIGNATURES:

\_\_\_\_\_  
Chair, IACUC (or Designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attending Veterinarian (or Designee)

\_\_\_\_\_  
Date

\_\_\_\_\_  
IACUC Member

\_\_\_\_\_  
Date