Annual Report to OLAW

Institution: Charles River – Research Models and Services
Assurance Number: D16-00496 (A3863-01)
Reporting Period: January 1, 2018 – December 31, 2018

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
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- [] A. There have been **no changes** in this institution's program for animal care and use as described in the Assurance. [Skip to Item II.]
- [x] B. Change(s) in this institution's program for animal care and use as described in the Assurance have occurred during this reporting period. (FAQ 6)

Select all that apply:

[]	Th	nis ir	stitution's AAALAC accreditation status has changed (PHS Policy IV.A.2.).
		[]	AAALAC Accredited – Category 1
		[]	Non-Accredited – Category 2
[]	Th	nis ir	stitution's program for animal care and use has changed (PHS Policy IV.A.1.a-i.).

The Charles River Cambridge facility was relocated to 100 Binney Street 5th floor, Cambridge, MA 021242. The Charles River Research Models (RMS) site located in Frederick, MD was closed in July 2018.

- [] The individual designated by this institution as the Institutional Official has changed. [Provide name, title(s), address, e-mail, phone, and fax numbers in Item V.]
- [X] The membership of this institution's IACUC has changed. [Provide current roster of members in Item VI.]

II. Semiannual Evaluations

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

A. Program Evaluations

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

Charles River Laboratories' IACUC has conducted program reviews and facility inspections of each of its animal facility locations as listed in our assurance statement on the dates listed below.

Date 1: Hollister, CA - 14FEB2018	Date 2: 9AUG2018
Date 1: San Diego, CA – 15FEB2018	Date 2: 7AUG2018
Date 1: Frederick, MD IS - 14FEB2018	Date 2: 7AUG2018
Date 1: Frederick, MD - RMS - 14FEB2018	Date 2: NA (site closed)
Date 1: Kingston, NY - 26MAR2018	Date 2: 21SEP2018
Date 1: Raleigh, NC - 10APR2018	Date 2: 25SEP2018
Date 1: Wilmington, MA - 04JUN2018	Date 2: 29NOV2018
Date 1: CRADL-Cambridge, MA – 31JAN2018	Date 2:26JULY2018
Date 1: Shrewsbury, MA - 30APR2018	Date 2: 24OCT2018

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.]

te 1:	Date 2:
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Please see above Program review dates for all sites. Facility inspections were done on the same dates as the program review.

III. Minority Views [Select A or B]

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

IV. Signatures

IACUC Chairperson	Institutional Official		
Name: Kathleen A. Murray, DVM, MS, DACLAM	Name: James C. Foster		
(b) (6)	DocuSianed by: (b) (6)		
Signature:	Signature: A1662371F90843E		
Date: 2/1/2019	Date: 04-Feb-2019		

V. Change in Institutional Official

Name:				
Title:	Degree/Credential:			
Name of Institution:				
Address: [street, city, state, zip code]				

E-mail:	
Phone:	Fax:

VI. Change in IACUC Membership [Current roster]

Institution: Charles River, Research Models and Services							
IACUC Contact Information							
Address: [street, city, state, zip code] 251 Ballardvale Street Wilmington, MA 01887							
E-mail: kathleen.murra	y@crl.com						
Phone: (b) (6)			Fax:	(b) (6)		
IACUC Chairperson							
Name: Kathleen A. Mur	ray (1)						
Title: Exec. Dir., Global	Preclinical LAM		Degree	e/Credentials	: DVM, MS, DACLAM		
PHS Policy Membership I	Requirements***: IA	CUC	C Chair				
IACUC Roster [Provide	below or attach]						
Name of Member/ Code*	Degree/ Credential	Oc	sition Tit cupatior ckgroun	nal	PHS Policy Membership Requirements***		
				(b) (6	Scientist		
					Member		
(4) Allison Williams	DVM, DACLAM			eterinary & al Services	Veterinarian		
				(b) (d	Member		
					Veterinarian		
					Member		
					Non-affiliated & Non- scientist		
					Member		
Member							

Change in IACUC Membership [Current roster]

Institution: Charles River Massachusetts							
IACUC Contact Information							
Address: [street, city, state, zip code] 334 South Street Shrewsbury, MA 01545							
E-mail: Kathleen.murra	ay@crl.com						
Phone (b) (6)			Fax: NA				
IACUC Chairperson							
Name: Kathleen A. Mu	rray, DVM, MS, DA	CLA	M (1)				
Title: Exec. Director, G	lobal Preclinical LA	М	Degree/Credentia	ls: DVM, MS, DACLAM			
PHS Policy Membership	Requirements***:	Cha	nirperson				
IACUC Roster [Provid	e below or attach]						
Name of Member/ Code*	Degree/ Credential	Oc	sition Title/ cupational ckground**	PHS Policy Membership Requirements***			
	Veterinarian						
	Member						
				Non-scientist			
				Scientist			
				Scientist			
				Non-affiliated & Non-scientist			
Alternate for							
	Alternate for member 4						
Alternate for member 6							

^{*} 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 (for

example, ethicist, lawyer, member of the clergy).

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

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

consulting veterinarian may not be considered nonaffiliated.

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