



DEPARTMENT OF HEALTH & HUMAN SERVICES

PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH

FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare
6700B Rockledge Drive, Suite 2500, MSC 6910
Bethesda, Maryland 20892-6910
Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
6700B Rockledge Drive, Suite 2500
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facsimile: (301) 402-7065

April 15, 2019

Re: Animal Welfare Assurance
A3291-01 [OLAW Case 3G]

Mr. Joshua Murphy
Chief Legal Officer
Mayo Foundation
200 First Street, S.W.
Rochester, MN 55905

Dear Mr. Murphy,

The Office of Laboratory Animal Welfare (OLAW) acknowledges receipt of your March 28, 2019 letter reporting a serious deviation from the provisions of the *Guide for the Care and Use of Laboratory Animals* at the Mayo Clinic. According to the information provided, OLAW understands that a mouse died after being trapped between the feeder and cage lid during cage changing by the Animal Care Technician (ACT). The laboratory staff had not visited the room to access the cages. The incident was not promptly reported from the Department of Comparative Medicine (DCM) to the Institutional Animal Care and Use Committee (IACUC).

The corrective actions consisted of the IACUC chair counseling the investigator to ensure that staff is careful when handling mouse cages and having the facility supervisor provide the ACT with a verbal warning and placement on a performance improvement plan. Staff have reviewed the reporting procedures to ensure that animal deaths are promptly reported from DCM to the IACUC.

Based on its assessment of this explanation OLAW understands that measures have been implemented to prevent recurrence of this problem. OLAW concurs with the actions taken by the IACUC to comply with the PHS Policy on Humane Care and Use of Laboratory Animals.

Sincerely,

(b) (6)

Axel Wolff, M.S., D.V.M.
Deputy Director
Office of Laboratory Animal Welfare

cc: IACUC Chair

***Institutional Animal Care and Use Committee***

200 First Street SW
Rochester, MN 55905

(b) (6)

March 28, 2019

Axel Wolff, M.S., D.V.M.
Director, Division of Compliance Oversight
Office of Laboratory Animal Welfare
Rockledge One, Suite 360
6705 Rockledge Drive
Bethesda, MD 20817

Dear Dr. Wolff:

The Mayo Clinic, in accordance with Assurance number D16-00187 (A3291-01) and PHS Policy IV.F.3 provides this report of serious deviations from the *Guide for the Care and Use of Laboratory Animals* regarding a husbandry incident that resulted in the death of a mouse. The mouse was on an approved protocol that was funded by federally funded grants: National Institutes of Health / Grant AR066696 and National Institute of General Medical Sciences / Grant GM128594.

On February 27, 2019, the Institutional Animal Care and Use Committee reviewed a report from the Department of Comparative Medicine (DCM) noting the death of a mouse. Please note that the death of the animal occurred on or around December 19, 2018. However, the incident report was missed from the electronic reporting process from DCM to IACUC, and it was brought to our attention only recently. We deeply regret the error in the process. Our thorough investigation included interviews with involved personnel and identified that the mouse was found trapped between the feeder and the cage lid. The Animal Care Technician (ACT) changed the cage. The investigator's lab technician was out sick and would not have accessed the cage, nor did the investigator visit the animal room. IACUC determined that the death of animal was caused by a husbandry error by the ACT.

The IACUC chair has met with the investigator of the protocol to discuss the situation. The chair reminded the investigator to take extra cautions when handling mouse cages even though he and his laboratory are unlikely to be responsible for this case.

The DCM facility supervisor verbally warned the ACT and has created a performance improvement plan with the ACT. The ACT understands that the performance improvement plan is a part of a corrective action plan and it may be elevated if any errors occur in future.

We regret this incident in our animal care program. We have also verified the SOP for reporting of animal deaths so that it will be communicated from DCM to IACUC flawlessly, if it occurs. Mayo Clinic is committed to protecting the welfare of animals used in research. We will continue making improvements as outlined in our monthly reports. Please feel free to contact the (b) (6) if any additional concerns remain.

Respectfully,

DocuSigned by:
(b) (6)
DE3CAE8CF1C0491...

Joshua B. Murphy
Mayo Clinic
Institutional Official and Corporate Secretary

cc: Hirohito Kita, M.D., Chair, IACUC

(b) (6)

Morse, Brent (NIH/OD) [E]

From: OLAW Division of Compliance Oversight (NIH/OD)
Sent: Wednesday, April 10, 2019 8:59 AM
To: IACUC; OLAW Division of Compliance Oversight (NIH/OD)
Cc: Kita, Hirohito, M.D.; (b) (6)
Subject: RE: Incident Reports from Mayo Clinic - D16-00187

Thank you for providing these reports. We will send official responses soon.

Best regards, Brent Morse

Brent C. Morse, DVM, DACLAM
Director
Division of Compliance Oversight
Office of Laboratory Animal Welfare
National Institutes of Health

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From: IACUC [mailto:iacuc@mayo.edu]
Sent: Monday, April 01, 2019 12:56 PM
To: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>
Cc: Kita, Hirohito, M.D. <kita.hirohito@mayo.edu>; (b) (6)
(b) (6)
Subject: Incident Reports from Mayo Clinic - D16-00187
Importance: High

Good Afternoon,

Please see the attached incident reports from Mayo Clinic's Institutional Animal Care and Use Committee (IACUC) D16-00187. Thank you!

Institutional Animal Care and Use Committee (IACUC) | Administrative Services - Research | (b) (6)
(b) (6) | Fax: (b) (6) | iacuc@mayo.edu
Mayo Clinic | 200 First Street SW | Rochester, MN 55905 | www.mayoclinic.org