

DEPARTMENT OF HEALTH & HUMAN SERVICES

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

August 26, 2019

#### PUBLIC HEALTH SERVICE NATIONAL INSTITUTES OF HEALTH

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

### Re: Animal Welfare Assurance A3823-01 [OLAW Case 7Y]

Dr. Adam Kuspa Senior Vice President for Research Baylor College of Medicine One Baylor Plaza, BCM310 Houston, TX 77030

Dear Dr. Kuspa,

The Office of Laboratory Animal Welfare (OLAW) acknowledges receipt of your August 16, 2019 letter reporting an instance of noncompliance with the PHS Policy on Humane Care and Use of Laboratory Animals at Baylor College of Medicine. According to the information provided, OLAW understands that 76 mice received expired analgesic following a survival surgery. There were no reported animal problems associated with the expired drug. The investigator responsible had not completed the final proficiency assessment of the institutional training.

The corrective actions consisted of labeling and segregating the expired drug, obtaining new stock, revising the drug log to ensure verification of expiration dates, implementing an alert system for all drug expiration dates, requiring a surgery oversight plan from the Principal Investigator (PI), and placing the laboratory under enhanced oversight by the Institutional Animal Care and Use Committee (IACUC). The PI's plan is to account for all surgeries and drugs and must be signed off by another laboratory surgeon, the plan will be reviewed by the IACUC, the PI and staff will be counseled by the IACUC chair, the PI will review records and checklists with staff, and the PI will document review of surgical records. The investigator involved subsequently completed the proficiency assessment.

Based on its assessment of this explanation, OLAW understands that measures have been implemented to correct and prevent recurrence of this problem. OLAW concurs with the actions taken by the IACUC to comply with the PHS Policy and we recommend that the steps taken to ensure that only in-date drugs are used in animals be extended to all laboratories. Thank you for informing OLAW about this matter.

Sincerely,

(b) (6)

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

cc: IACUC Chair

# A 3823-7 OFFICE OF RESEARCH



One Baylor Plaza, BCM310 Houston, Texas 77030-3411

> (713) 798 – 6983 (713) 798 – 2721 FAX akuspa@bcm.edu



CONFIDENTIAL

August 16, 2019

Brent Morse, DVM Acting Director, Division of Compliance Oversight Office of Laboratory Animal Welfare National Institutes of Health olawdco@mail.nih.gov

RE: Assurance #D16-00475

Dear Dr. Morse,

As Institutional Official for Baylor College of Medicine (BCM), I have the duty to inform you of our Institutional Animal Care and Use Committee's (IACUC) recent finding in animal research after an assessment of the following protocol:

Protocol: AN-6434: Consequences of Chromatin Modification Disruption in PDAC Species: Mice Funding Source: Non-PHS Funding

For this investigator's first incident of this nature, the IACUC determined that the following findings constitute serious noncompliance<sup>1</sup> with the federal regulations:

#### Expired Controlled Substances <sup>11, 11</sup>

During a post-approval monitoring session, a review of the controlled substance log and surgical records indicated that seventy-six mice received expired Buprenorphine following a laparotomy procedure. There were no complications with the surgical procedures or post-operative care and all animals recovered as expected without any issues.

#### Required Training <sup>iv</sup>

During a review of required surgical training records it was discovered that the researcher responsible did not complete the final proficiency assessment of the institutional training prior to conducting surgical procedures. The researcher successfully completed all other required modules, including the on-line portion, the pre-operative laboratory and

<sup>&</sup>quot;PHS Policy IV.F.3.a: "The IACUC, through the Institutional Official, shall promptly provide OLAW with a full explanation of the circumstances and actions taken with respect to: a. any serious or continuing noncompliance with this Policy"

<sup>&</sup>lt;sup>ii</sup> PHS Policy IV.C.1.b: "Procedures that may cause more than momentary or slight pain or distress to the animals will be perform with appropriate sedation, analgesia, or anesthesia, unless the procedure is justification for scientific reasons in writing by the investigator."

<sup>&</sup>quot;BCM IACUC Guidelines Use Guidelines for Expired Drugs, Medical Material: The use of expired drugs and medical material such as fluids, catheters, or suture material for survival procedures is not considered to be acceptable veterinary practice and does not constitute adequate veterinary care." *The Guide* for the Care and Use of Laboratory Animals. p115: "Researchers conducting surgical procedures must have appropriate training to ensure that good surgical technique is practiced ~ that is, asepsis, gentle tissue handling, minimal dissection of tissue, appropriate use of instruments, effective hemostasis, and correct use of suture materials and patterns."

intra-post-operative laboratory modules. As of this letter, the researcher has successfully completed the proficiency assessment, meeting all requirements of the required institutional surgical training.

#### **Corrective Actions:**

- 1. The expired drug was immediately labelled and segregated and a new supply was obtained.
- 2. A revised drug log was implemented to ensure verification of the expiration date.
- 3. An automated alert reminder system was implemented for all controlled and non-controlled substances to notify all laboratory personnel one month before any drugs expire.
- The IACUC requires a comprehensive plan from the PI to ensure appropriate oversight of compliance by all personnel involved in surgery.
  - The oversight plan must include a process of accounting of all surgeries conducted, substances delivered to an animal during the perioperative periods, including anesthetic and analgesic drugs (pre- & post-surgery), and a verification process that such activities were performed by the surgeon, e.g. review and sign-off by a lab manager or another lab surgeon (i.e. a "buddy system").
  - The plan will be reviewed at the next convened IACUC meeting for approval. If the plan is not approved, all surgeries will be suspended until a satisfactory plan is approved by the IACUC.
  - Once the plan is approved, the IACUC Chair will convene a mandatory meeting with the Pl and laboratory personnel to review and discuss the determination, the required corrective actions, and the plans for ensuring compliance.
  - The Principal Investigator (PI) will review records, procedures, and compliance (e.g. any checklists, discussion at lab meetings, and description of material reviewed).
  - The PI will document in writing their review of the surgical records and notify the IACUC of any deviations from approved procedures.
- 5. There will be increased oversight of the surgeries performed under supervision of the PI by the IACUC for six months after approval of the plan.
  - There will be two Post-Approval Monitoring (PAM) reviews focused on surgery within 6 months of the IACUC determination.
  - A monthly review of all surgery, anesthesia, and analgesia records and adherence to the plan will be conducted.
- If compliance with the IACUC approved plan or the increased oversight is not maintained, there will be escalating punitive corrective actions including, but not limited to suspension of all surgical privileges.

This notification will also be sent to AAALAC International, and non-PHS funding source according to the terms and conditions of the award.

Please do not hesitate to contact me if you have any questions.

Sincerely, (b) (6)

Adam Kuspa, PhD Senior Vice President and Dean of Research Institutional Official Baylor College of Medicine

cc: Principal Investigator Department Chair Research Compliance Services files

## Morse, Brent (NIH/OD) [E]

From:	OLAW Division of Compliance Oversight (NIH/OD)	
Sent:	Wednesday, August 21, 2019 11:56 AM	
То:	(b) (6)	OLAW Division of Compliance Oversight (NIH/OD)
Cc:	(b) (6)	
Subject:	RE: OLAW Repo	rt – Assurance D16-00475

Thank you for providing these reports (b) (6) 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

Please note that this message and any of its attachments are intended for the named recipient(s) only and may contain confidential, protected or privileged information that should not be distributed to unauthorized individuals. If you have received this message in error, please contact the sender.

From:<sup>(b) (6)</sup> Sent: Wednesday, August 21, 2019 9:48 AM To: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov> Cc: <sup>(b) (6)</sup> Subject: OLAW Report – Assurance D16-00475

Dear Dr. Morse,

Please find attached notifications of research non-compliance as determined by our IACUC, and sent on behalf of Dr. Adam Kuspa, Institutional Official.

Please feel free to contact me if you have any questions.

Thank you,

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