Annual Report to OLAW

| Institution: NYU Grossman School of Medicine |
|---|
| Assurance Number: D16-00274 (formerly A3435-01) |
| Reporting Period: January 1 – December 31, 2019 |

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).

| | Ι. | Program | Changes | [Select A | A or B |
|--|----|---------|---------|-----------|--------|
|--|----|---------|---------|-----------|--------|

- [] A. There have been **no changes** in this institution's program for animal care and use as described in the Assurance.
- [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:

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

- [] Non-Accredited Category 2
- [x] This institution's program for animal care and use has changed (PHS Policy IV.A.1.a-i.).

See Item VII.

- [] 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. **See 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.

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: June 10, 2019 | Date 2: December 4, 2019 |
|-----------------------|---------------------------------|
|-----------------------|---------------------------------|

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: see attached Appendix 1 Date 2: see attached Appendix 1

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 PHS
 Policy IV.F. for this reporting cycle are attached.

IV. Signatures

| IACUC Chairperson | Institutional Official |
|-------------------------------|--------------------------|
| Name: Ann Marie Schmidt, M.D. | Name: Jeremy Paul, Ph.D. |
| Signature: | (b) (б) |
| Date: 1771010 | Date: 1/22/20 |

V. Change in Institutional Official

| Name: | and the second s |
|--|--|
| Title: | Degree/Credential: |
| Name of Institution: | |
| Address: [street, city, state, zip code] | |
| E-mail: | |
| Phone: | Fax: |

VI. Change in IACUC Membership [Current roster]

Institution: NYU Grossman School of Medicine - an administrative unit of New York University **IACUC Contact Information** Address: Office of the IACUC and IBC One Park Avenue, (b) (4) New York, NY 10016 E-mail: IACUC@nyulangone.org (b) (6) Fax: **n/a** Phone: **IACUC Chairperson** Name: Ann Marie Schmidt Title: Dr. Iven Young Professor of Endocrinology, Professor of Medicine, Degree/Credentials: M.D. **Biochemistry and Molecular Pharmacology** and Pathology PHS Policy Membership Requirements***: **IACUC Roster** Position Title/ Name of Member/ Degree/ PHS Policy Membership Occupational Code* Credential Requirements*** Background** Chairman (Professor of Medicine. Biochemistry and Ann Marie Schmidt M.D. Scientist Molecular Pharmacology and Pathology) (b) (6) Scientist Scientist Scientist

| Name of Member/ Code* | Degree/ Credential | Position Title/ Occupational Background** | PHS Policy Membership Requirements*** |
|--------------------------|-----------------------|---|--|
| | | (b) (6) | Scientist |
| | | | Scientist |
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| | | | Scientist |
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| | | | Scientist |
| | | | Scientist |
| | | | |

| Name of Member/ Code* | Degree/ Credential | Position Title/ Occupational Background** | PHS Policy Membership Requirements*** |
|--------------------------|---------------------------------|---|--|
| | | (b) (6) | Scientist |
| | | | Scientist |
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| | | | |
| | | | |
| Jennifer Pullium | M.V.B., D.A.C.L.A.M. | Member (Senior Director, DCM) | Veterinarian |
| Kevin Prestia | D.V.M., M.P.H., D.A.C.L.A.M. | Member (Director, DCM) | Veterinarian |
| | | (b) (6) | Veterinarian |
| | | | <u>Veterinarian</u> |
| | | | <u>Veterinarian</u> |
| | | | Veterinarian |

| Name of Member/ Code* | Degree/ Credential | Position Title/ Occupational Background** | PHS Policy Membership Requirements*** |
|--------------------------|-----------------------|---|--|
| | | (b) (6 | |
| | | | |
| | | | |
| | | | Nonscientist |
| | | | Nonscientist |
| | | | Nonaffiliated |
| | | | Nonaffiliated |

^{*} 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.

^{***} 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.]

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

VII. Changes in the Institution's Animal Care and Use Program

- 1. The full-asset merger of NYU Langone Health and NYU Winthrop hospital was completed as of 8/1/2019.
- 2. Institutional Program for Animal Care and Use
 - a. The NYU Winthrop IACUC was disbanded and the IACUC of record became the NYU School of Medicine IACUC effective 9/1/2019. The roster includes scientific members from the disbanded NYU Winthrop IACUC. The IACUC roster is in section VI of this document.
- 3. The NYU School of Medicine was renamed the NYU Grossman School of Medicine on 11/4/2019.

APPENDIX 1

| APPENDIX I | 2019 IACUC Inspection Dates | |
|--|------------------------------|------------------------|
| ANIMAL FACILITIES | <u>First Inspection Date</u> | Second Inspection Date |
| (b) (4) | 4/11/2019 | 10/21/2019 |
| | 4/1/2019 | 10/1/2019 |
| | 4/9/2019;4/15/2019 | 9/5/2019 |
| | 3/14/2019 | 9/18/2019 |
| | 3/4/2019 | 9/13/2019 |
| SATELLITE HOUSING FACILITIES / LOCATIONS | | |
| (b) (4) | 4/4/2019 | 10/29/2019 |
| | 5/9/2019 | 11/7/2019 |
| | 4/19/2019 | 10/3/2019 |
| | 4/8/2019 | 10/14/2019 |
| | 4/1/2019 | 10/1/2019 |
| | CLOSED | CLOSED |
| | 4/11/2019 | 10/22/2019 |
| | 4/19/2019 | 10/7/2019 |
| | 4/8/2019 | 10/14/2019 |
| | 4/8/2019 | CLOSED |
| | 4/8/2019 | 10/14/2019 |
| | 4/8/2019 | 10/14/2019 |
| | 4/1/2019 | CLOSED |
| | 3/4/2019 | 9/13/2019 |
| | 3/6/2019 | 9/13/2019 |
| | 3/5/2019 | 9/13/2019 |

| | 2019 IACUC Inspection Dates | |
|--|-----------------------------|------------------------|
| SATELLITE HOUSING FACILITIES / LOCATIONS CONTINUED | First Inspection Date | Second Inspection Date |
| (b) (4) | 3/5/2019 | 9/13/2019 |
| | 3/4/2019 | 9/13/2019 |
| | 3/4/2019 | 9/13/2019 |
| | 3/8/2019 | 9/13/2019 |
| | 3/4/2019 | 9/13/2019 |
| | 3/4/2019 | 9/13/2019 |
| | 3/4/2019 | 9/13/2019 |
| | 3/4/2019 | 9/13/2019 |
| | Approved 4/21/19 | 10/14/2019 |
| | | |
| LABS | 3/4/19-4/30/19 | 9/5/19-10/29/19 |