

VIII. Membership of the IACUC

Date: January 6, 2016
Name of Institution: Advanced Science Research Center, The City University of New York
Assurance Number:
IACUC Chairperson
Name*: Dr. Daniel E. Lemons
Title*: Professor of Biology
Degree/Credentials*: Ph.D.
Address*: Dept. of Biology, City College of New York, 160 Convent Ave., (b) (4) New York, NY 10031
E-mail*: dlemons@ccny.cuny.edu
Phone*: (b) (6) Fax*:

IACUC Roster			
Name of Member/ Code**	Degree/ Credentials	Position Title***	PHS Policy Membership Requirements****
Dr. Daniel E. Lemons	Ph.D.	Professor of Biology	<u>Scientist</u> ; 40 years experience in research involving vertebrate animals
Dr. Sylvia Singletary	DVM	Veterinarian, Director of ASRC Animal Care Facility	<u>Veterinarian</u> with training and experience in laboratory animal science and medicine and in the use of the species at the institution; has direct program authority and responsibility for activities involving animals at the institution
(b) (6)			

X. Facility and Species Inventory Date: January 6, 2016			
Name of Institution: CUNY Advanced Science Research Center			
Assurance Number: tbd			
Laboratory, Unit, or Building*	Gross Square Feet [include service areas]	Species Housed [<i>use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog</i>]	Approximate Average Daily Inventory
(b) (4)	17,000	Mice	805
	2000	Rats	0
	500	Cats	2
	500	Ferrets	0

Memorandum to: Vice Chancellor Gillian Small, IO

From: Institutional Animal Care and Use Committee

Subject: Semiannual Report of the Program Review and Facility Inspection

Date: 12/2/2015

This report summarizes the IACUC's results of its most recent program review and facility inspection, as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy), Section IV.B.1.-3., the *Guide for the Care and Use of Laboratory Animals* (Guide), and the Animal Welfare Act (AWA) regulations, as applicable. Submission of semiannual reports to the Institutional Official is a condition of this institution's Animal Welfare Assurance with the NIH Office of Laboratory Animal Welfare (OLAW).

Since the last review, the following changes have occurred in the institution's program for animal care and use (PHS Policy IV.A.1.a.-i.): [optional]

The new ASRC vivarium facilities have reached the stage of being ready for an inspection by the IACUC and have been judged ready to receive animals as detailed below.

Key IACUC policies have been approved by the committee.

I. Description of the Nature and Extent of the Institution's Adherence to the PHS Policy, the *Guide*, and the AWA

Departures from the PHS Policy, the *Guide*, and the AWA.

Select A or B:

- ☒ A. There were no departures during this reporting period.
- ☐ B. The following departures have been reviewed and approved by the IACUC: *[include reason for each departure]*

II. Deficiencies in the Institution's Animal Care and Use Program

Animal Care and Use Program Review Date(s):

Select A or B:

- ☒ A. There were no deficiencies in the program during this reporting period.
- ☐ B. The following deficiencies have been identified: *[describe each deficiency, identify each deficiency as either minor or significant, and provide a reasonable and specific plan and schedule for the correction of each deficiency, deficiencies may be recorded on a separate table and attached, the last page of OLAW's Sample Semiannual Program Review and Facility Inspection Checklist provides a sample table]*

III. Deficiencies in the Institution's Animal Facility

Animal Facility Inspection Date(s):

Select A or B:

- ☐ A. There were no deficiencies in the animal facility during this reporting period.
- ☒ B. The following deficiencies have been identified: *[describe each deficiency, identify each deficiency as either minor or significant, and provide a reasonable and specific plan and schedule for the correction of each deficiency, deficiencies may be recorded on a separate table and attached, the last page of OLAW's Sample Semiannual Program Review and Facility Inspection Checklist provides a sample table]*

See attached table for details.

IV. Minority Views

Select A or B:

- ☒ A. No minority views were submitted or expressed.
- ☐ B. The following minority views were expressed: *[insert minority views here or attach]*

V. Status of AAALAC Accreditation *[identify accredited facilities, if applicable]*

Have not applied for accreditation

VI. Signatures *[signatures of a majority of the IACUC members required by AWAR (§2.31,c,3), if applicable]*

Names of IACUC Members	Signatures
Sylvia Singletary	(b) (6)
Daniel Lemons	
(b) (6)	

I. Semiannual Program Review and Facility Inspection Report

Date: updated 12-11-2015 (based on inspection of 10/23/2015)

Members in Attendance: Sylvia Singletary, Daniel Lemons, (b) (6)

(b) (6)

Deficiency Category*	✓	Location	Deficiency and Plan for Correction	Responsible Party	Correction Schedule and Interim Status	Date Complete
M		(b) (4)	<p>Environmental monitoring system reports are not available to facilities manager; all rooms have individual monitors but currently they must be read in person, individually. Complete 24-hr. records are needed. Hand-entered logs of spot recording over the past 30 days reveal some significant room temperature variations that should be better documented to insure they not exceed acceptable limits. The ASRC Facilities Director will be asked to insure that these records are provided on an ongoing basis and that any unacceptable deviation in these variables from standards be corrected.</p> <p>Also need to confirm and document the notification chain for alarms and the plan for responding.</p> <p>Signage about the emergency contact chain should be posted.</p>	ASRC facilities director and (b) (4) manager	ASRC Facilities Director, David Salmon was contacted on 10/24/2015 and is working with the building operations staff who operate the BMS system to deliver daily reports to the facilities manager. A monitoring BMS station will be placed in the Facilities Manager's office with which all reports can be accessed and printed.	In progress with data available as of 11/12/2015 to facilities manager, but awaiting permanently installed 24/7/365 access to relevant BMS data. Until completed monitoring done daily by manual method 10/27/2015
M			Vermin control program needs to be initiated; additional door sweeps are also needed on some doors. Though not required, the IACUC thinks they should be put in place.	CCNY facilities	Program to be established on 10/27/2015 and Facilities Manger will certify that it is sufficient.	10/27/2015

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A	(b) (4)	Air flow/pressure monitors were showing red, indicating inadequate negative pressure maintenance, though on reset they switched to green or satisfactory, but then back to red.	ASRC facilities management	Air flow specs for all rooms were received and facilities was asked to verify operation according to them. The rooms with the issues will not be holding animals now, so this is not an immediate concern	
A	(b) (4)	Environmental enrichment – program needs to be in place when animals arrive; need a list of enrichment items to order for the animals since (b) (4) facility will likely want to keep those items currently in use with the animals being moved	ASRC (b) (4) manager	Are available now.	10/30/2015
A	(b) (4)	Possibly need a "diverter" for formaldehyde (and/or other substances) if they are to be used. Need to determine if this is an issue and if it is, plan and implement solution.	ASRC Environmental Health & Safety Officer and Facilities Director	Verify whether is an issue by week of November 2, and resolve if it is.. The table has an option for adding a diverter and it will be added before this use is required.	12/9/2015
A	(b) (4)	Need copy of CCNY Disaster plan which covers the ASRC (b) (4) This plan is in place but a copy is needed.	Facilities Manager obtain from CCNY Facilities Manager	Have copy available by week of Nov. 2.	11/3/2015

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A	(b) (4)	Signage needs to be in place indicating how concerns may be registered about animal care and use. Anonymity needs to be an option.	ASRC Facilities Manager and IACUC Chair will do this.	Have in place by the time animals are moved into the facility. Week of Nov. 30.	12/2/2015
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- * **A** = acceptable
- M** = minor deficiency
- S** = significant deficiency (is or may be a threat to animal health or safety)
- C** = change in program (PHS Policy IV.A.1.a.-i.) (include in semiannual report to IO and in annual report to OLAW)
- NA** = not applicable
- ✓ Check if repeat deficiency

Report Approved: 12-2-2015