

Office for Research - Research Outreach & Compliance

921 S. 8th Avenue, Stop 8046 • Pocatello, Idaho 83209-8046

Annual Report to OLAW

]	Institution: Idaho State University								
1	Assı	ıra	nce	Numb	er: A3623-1				
F	Зер	orti	ng	Period			January 1, 2019- December 31, 2019		
TI	nis i ffici	nst al,	itut pro	ion's II vides t	nstitutional Anima his annual report	al Care and Use Com to the Office of Labo	mittee (IACUC), through the Institutional ratory Animal Welfare (OLAW).		
I.	P	ro	gra	m Ch	anges [Select /	A or B]			
]]	Α.	d	here ha	ave been no cha ed in the Assurance	nges in this institution ce. [<i>Skip to Item II.</i>]	on's program for animal care and use as		
	X]	В.	C h	hange(ave oc	(s) in this instituti curred during this	ion's program for ani reporting period. (<u>F</u>	mal care and use as described in the Assuranc AQ 6)		
		Se	elec	t all th	at apply:				
]]	This i	nstitution's AAAL	AC accreditation stat	us has changed (PHS Policy IV.A.2.).		
				[X]	AAALAC Accred	ited - Category 1			
				[]	Non-Accredited	- Category 2			
		[] This institution's program for animal care and use has changed (PHS Policy [Attach a full description of the changes.]					nd use has changed (<u>PHS Policy IV.A.1.a-i.</u>).		
		[] 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]		nembership of thi bers in Item VI.]	s institution's IACUC	has changed. [Provide current roster of		
I.	S	em	iai	nnual	Evaluations				
	th ev ar (s	e ii valu iy I ign	IACUC has conducted semiannual evaluations of the institution's program and inspections of institution's facilities (including satellite facilities) on the dates below. Reports of the dations and inspections have been submitted to the Institutional Official. The reports include IACUC-approved departures from the <i>Guide</i> with a reason for each departure, any deficiencies difficant or minor) that were identified, and a plan and schedule for correction of each diency. [Do not provide semiannual reports unless they include a minority view.]						
	A.	. Program Evaluations							
		e	valı	uations	be done at 6 mo	onth intervals. If the	to satisfy the PHS Policy requirement that IACUC conducted more than 2 evaluations of attach a list showing the dates.]		
			Dat	e 1: 4/	19/19		Date 2: 11/11/19		

Annual Report

II.

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B. Facility Inspection	ons
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[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.]

- Value - I also a substitution of the substit	
Date 1: 4/15/19	Date 2: 10/21/19

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</u> <u>Policy IV.F.</u> for this reporting cycle are attached.

IV. Signatures

IACUC Chairperson	Institutional Official		
Name: Erin Rasmussen, PhD	Name: Scott Snyder, PhD,		
(b) (б)	(b) (6)		
Signature:	Signature		
Date: 1113/2020	Date: 1/14/20		

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: Idaho S	tate University									
IACUC Contact Info	rmation									
Address:										
C.O. (b) (6)										
921. S. 8 th Ave.										
Stop 8286										
Pocatello, ID 83209										
E-mail: anmlcare@isu.edu										
Phone: (b) (0)		Fax:							
IACUC Chairperson										
Name: Dr. Erin Rasmi	ussen		,							
Title: Professor			Degree/Credentials	PhD Psychology						
PHS Policy Membersh	p Requirements***	: Chair								
IACUC Roster [Provi	de below or attach]								
Name of Member/ Degree/ Code* Credential		00	sition Title/ cupational ckground**	PHS Policy Membership Requirements***						
Shelley Knight	DVM	At	tending Veterinarian	Veterinarian						
		(b) (6)		Scientist						
				Non-Scientist						
				Non-Affiliated						
			-0							