

VIII. Membership of the IACUC

Date: 8/30/2017			
Name of Institution: California State University, Long Beach			
Assurance Number: D16-00247, A3390-01			
IACUC Chairperson			
Name*: John de la Cuesta			
Title*: Radiation & Science Safety Officer, College of Natural Sciences and Mathematics			Degree/Credentials*: M.S.
Address*: (street, city, state, zip code) Office of Research and Sponsored Programs California State University, Long Beach 1250 Bellflower Boulevard, MS 4509 Long Beach, CA 90840-4509			
E-mail*: John.delacuesta@csulb.edu			
Phone*: (b) (6)		Fax*: (b) (6)	
IACUC Roster			
Name of Member/ Code**	Degree/ Credentials	Position Title***	PHS Policy Membership Requirements****
John de la Cuesta	M.S.	Radiation & Science Safety Officer	Scientist
John Young	VMD, MS, DACLAM	Consulting Veterinarian	Veterinarian
(b) (6)			Non-voting member
			Alternate Scientist
			Scientist
			Nonaffiliated, nonscientist
			Scientist
			Scientist

X. Facility and Species Inventory

Date: 08/30/2017			
Name of Institution: California State University, Long Beach			
Assurance Number: D16-00247, A3390-01			
Laboratory, Unit, or Building*	Gross Square Feet [<i>include service areas</i>]	Species Housed [<i>use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog</i>]	Approximate Average Daily Inventory
(b) (4)	6,043	Rats	150
		Siberian Hamsters	101
		Mice	157

Memorandum to:

(b) (6)

From:

Institutional Animal Care and Use Committee

Subject:

Semiannual Report of the Program Review and Facility Inspection

Date:

May 31, 2017

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]

- New Director of Research Integrity and Compliance, Dr. Jason Wang, appointed.
- (b) (6)

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

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]*

N/A

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

CSULB INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE
SEMIANNUAL PROGRAM REVIEW & FACILITY INSPECTION SUMMARY
 Deficiencies identified during Program Review (March 22, 2017) and/or Facilities Inspection (April 13, 2017)

DATE: May 31, 2017

Deficiency Category (S or M)	*	Location	Deficiency & Plan for Correction	Responsible Party	Correction Schedule & Interim Status	Date Complete
M		(b) (4)	Expired suture material needs to be discarded	(b) (6)	PI has discarded the expired sutures. New sutures will be obtained before any new survival surgeries	5/23/17
M			Bottles labeled "Ket" (ketamine?) and "Coc" (cocaine?) were found in an unlocked refrigerator. A student was in the room when we entered but she immediately left. The room door was unlocked. If the vials do contain these controlled substances, the substances are not properly secured as per DEA regulation		PI has obtained and installed a lock.	5/30/2017

S = significant deficiency, **M** = minor deficiency (a significant deficiency is or may be a threat to animal health or safety)

*Check if repeat deficiency

John de la Cuesta _____ (b) (6)
 _____ (b) (6)

Jason Wang _____ (b) (6)
 _____ (b) (6)
 John Young _____ (b) (6)