University of Louisiana at Lafayette A3029-01

Animal Welfare Assurance for Domestic Institutions

I, Ramesh Kolluru, as named Institutional Official for animal care and use at the University of Louisiana at Lafayette, provide assurance that this Institution will comply with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy).

I. Applicability of Assurance

This Assurance applies whenever this Institution conducts the following activities: all research, research training, experimentation, biological testing, and related activities involving live vertebrate animals supported by the PHS and/or NSF. This Assurance covers only those facilities and components listed below.

- A. The following are branches and components over which this Institution has legal authority, included are those that operate under a different name:

 University of Louisiana at Lafayette New Iberia Research Center
- B. The following are other institution(s), or branches and components of another institution:

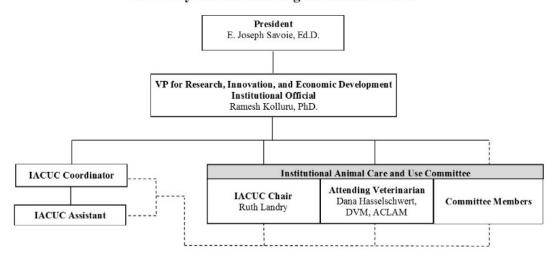
II. Institutional Commitment

- A. This Institution will comply with all applicable provisions of the <u>Animal Welfare Act</u> and other Federal statutes and regulations relating to animals.
- B. This Institution is guided by the "<u>U.S. Government Principles for the Utilization and Care of</u> Vertebrate Animals Used in Testing, Research, and Training."
- C. This Institution acknowledges and accepts responsibility for the care and use of animals involved in activities covered by this Assurance. As partial fulfillment of this responsibility, this Institution will ensure that all individuals involved in the care and use of laboratory animals understand their individual and collective responsibilities for compliance with this Assurance, and other applicable laws and regulations pertaining to animal care and use.
- D. This Institution has established and will maintain a program for activities involving animals according to the *Guide for the Care and Use of Laboratory Animals* (*Guide*).
- E. This Institution agrees to ensure that all performance sites engaged in activities involving live vertebrate animals under consortium (subaward) or subcontract agreements have an Animal Welfare Assurance and that the activities have Institutional Animal Care and Use Committee (IACUC) approval.

III. Institutional Program for Animal Care and Use

A. The lines of authority and responsibility for administering the program and ensuring compliance with the PHS Policy are as follows:

UL Lafayette IACUC Organizational Chart



Note: This organizational chart represents relationships for purpose of IACUC activities only. Individuals in this chart may have other duties and affiliations not represented herein.

- B. The qualifications, authority, and percent of time contributed by the veterinarian(s) who will participate in the program are as follows:
 - Name: Dana L. Hasselschwert, MS, MS, DVM, ACLAM Qualifications
 - Degrees:

Bachelor of Science in Parasitology and Medical Entomology, 1986, Bowling Green State University.

Master of Science in Biology, 1988, Bowling Green University.

Master of Science in Entomology, 1991, Louisiana State University.

Doctor of Veterinary Medicine, 1995, Louisiana State University.

ACLAM Board Certified, 2002.

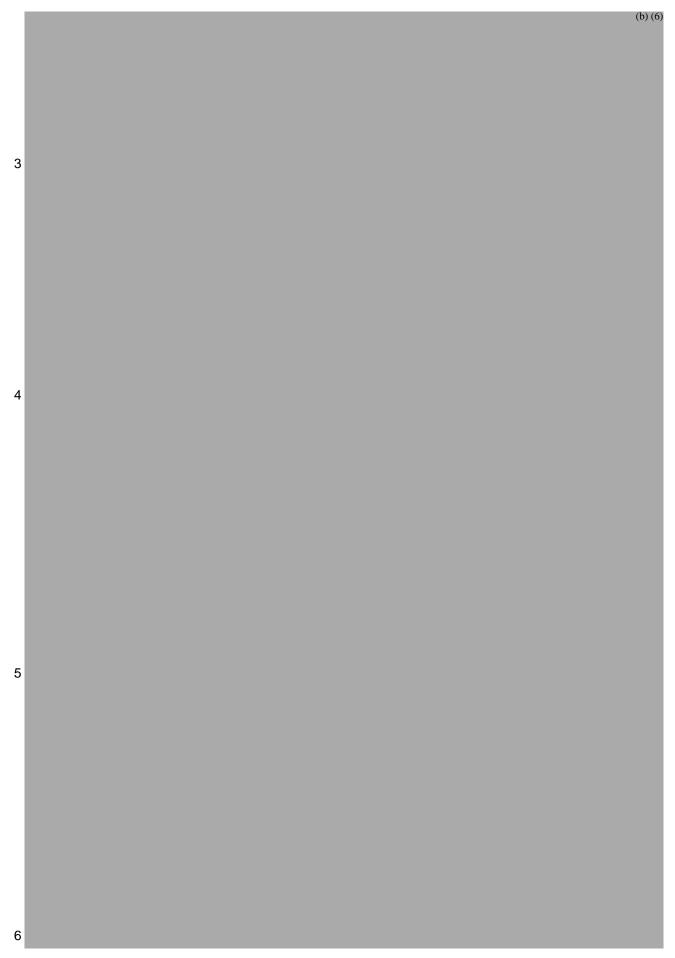
- Training or experience in laboratory animal medicine or in the use of the species at the institution: 1995-present - UL Lafayette-NIRC.
 - 21 years of laboratory animals experience.

Authority: Dr. Hasselschwert, as Head of the Division of Veterinary Sciences and IACUC Attending Veterinarian, has direct program authority and responsibility for the institution's animal care and use program including access to all animals.

Time contributed to program:

full time employee, 100% of time contributed to animal care and use program.







- 7) One veterinarian position open
- C. The IACUC at this Institution is properly appointed according to PHS Policy IV.A.3.a. and is qualified through the experience and expertise of its members to oversee the Institution's animal care and use program and facilities. The IACUC consists of at least 5 members, and its membership meets the composition requirements of PHS Policy IV.A.3.b. Attached is a list of the chairperson and members of the IACUC and their names, degrees, profession, titles or specialties, and institutional affiliations.

D. The IACUC will:

- 1) Review at least once every 6 months the Institution's program for humane care and use of animals, using the *Guide* as a basis for evaluation. The IACUC procedures for conducting semiannual program reviews are as follows:
 - a. A subcommittee of the IACUC meets semiannually for the program review. All members have the option to participate on the program review subcommittee.
 - b. The program review is based on published regulations found in PHS "Policy", USDA's 9 CFR, Subchapter A, Part 1-3, the *Guide*, and OLAW's IACUC Guidebook and uses the relevant section of the Semiannual Program Review checklist available online at http://grants.nih.gov/grants/olaw/sampledoc/cheklist.htm
 - c. The program review consists of a two-part evaluation of (1) the Institutional Policies and Responsibilities in regard to the Animal Care and Use Program; and (2) Veterinary Medical Care.
 - d. Review of Policies and Responsibilities considers: IACUC membership and function, records and reporting requirements, veterinary care, qualifications and training of personnel, health and safety of employees and visitors, and any other topic deemed appropriate by the Committee.
 - e. The Review of Veterinary Medical Care evaluates: the preventive medicine program of the facility, animal procurement and transport, surgical procedures, policy and practices regarding analgesia and anesthesia and the avoidance of unnecessary pain and distress, euthanasia, and the policy on controlled substances. Many of these evaluations involve the review of the institution's Standard Operating Procedures (SOPs) (Can be provided upon request).

- f. The subcommittee's review is presented to the IACUC, where items for improvement are discussed as well as the preparation of the reports to the IO, NIRC Director, and the Biology Department Head.
- 2) Inspect at least once every 6 months all of the Institution's animal facilities, including satellite facilities and animal surgical sites, using the *Guide* as a basis for evaluation. The IACUC procedures for conducting semiannual facility inspections are as follows:
 - a. Due to the size of the Institution's animal facility, the review is accomplished by utilization of sub-committees consisting of two or more IACUC members, with a designated leader. All members have the option to participate on the facility review subcommittees. Note IACUC members who have not completed the required health checks for the non-human primate areas will be assigned to non-primate animal areas. Members are assigned an area to inspect, and when possible, the individuals are rotated to new areas for each semiannual inspection. New IACUC appointees, taking part in their first facility review, must accompany an experienced IACUC member during the evaluation. The areas inspected include both animal housing and support areas.
 - b. The review is accomplished with the aid of an "Animal Facility Inspection Form". The form provides a summary of previous deficiencies, a list of all the rooms or slabs for each building or area, check boxes to indicate the overall condition of the animals, and room or area, a comment section to record specific deficiency notes, and check boxes to indicate whether the deficiency is minor or significant. The reverse side of the form also has a "floor plan", where notations can be made about locations. Each subcommittee also has a list of items that would be considered minor or significant deficiencies. The record is signed and dated by the inspection team.
- 3) Prepare reports of the IACUC evaluations according to PHS Policy IV.B.3. and submit the reports to the Institutional Official. The IACUC procedures for developing reports and submitting them to the Institutional Official are as follows:
 - a. Following the physical review of the facility, the findings are detailed in a spreadsheet and distributed to the Committee. During a follow up meeting, the committee discusses specific facility inspection items, overall impressions of the state of the facility and animal welfare, the classification of the deficiencies as minor or significant, and findings from the program review. The Chair solicits recommendations for remedies and timelines, as well as, whether there is a need for modification of any aspect of the animal care program. Minority views are noted in the report to the IO, as well as, the minutes of the meeting.
 - b. All findings are summarized in the Minutes of the Semiannual Program and Facility Review. A draft report of the facility deficiencies for the NIRC facility, complete with time lines for corrective action and recommended actions, is prepared and shared with the NIRC management during a meeting with a subcommittee of the IACUC to discuss the feasibility of timelines and clarity of notations. (Substantial findings that would require renovations in the Biology Department would also trigger this type of meeting) The final inspection reports are delivered to Center Directors, investigators and department heads. The original Program Review and Inspection Report documents are retained in the IACUC files. When deficiencies are found, the individual in charge of the area is given 4-6 weeks to respond to the report with an update on the deficiency status; reports are required quarterly thereafter for long term renovations. The report to the IO will be drafted following notification to Directors, investigators and department heads. The report to the IO will provide a summary of the findings. (Had any significant deficiencies been noted, facility personnel would be informed at the time of discovery by the subcommittee, and the Chair

and IO would be informed by the end of the day.) The report to the IO will also contain any minority views and a description of IACUC approved exceptions to the Guide. The report to the IO is circulated to the committee for comment. Following the comment period, the report to the IO is finalized and signed by a majority of the IACUC, prior to delivery to the IO. IACUC approved exceptions are reviewed in the same manner as an Animal Procedure Statement. The Semiannual Program Review meeting minutes may be approved either at the next meeting or via email.

4) Review concerns involving the care and use of animals at the Institution. The IACUC procedures for reviewing concerns are as follows:

Mechanisms that facilitate/enable individuals to report concerns. A notification of any individual's right to express concerns regarding animal care is prominently posted in all animal areas and on the Report an Animal Welfare Concern website http://vpresearch.louisiana.edu/node/712. An in-service is provided to instruct NIRC employees on the right to report any and all concerns regarding animal care and documentation of training is maintained in individual employee training files. Reports may be filed via memo to the IACUC through campus mail, phone, email to animalconcerns@louisiana.edu, or completing an anonymous form online at http://vpresearch.louisiana.edu/node/712.

How the IACUC reviews reported concerns. The IACUC Chair shall review the complaint, notify the Institutional Official, and schedule a meeting of a subcommittee of the IACUC to review the complaint within ten (10) business days. The IACUC Chair will notify the alleged involved individual(s) and the person(s)' supervisor(s) that a complaint was received, and afford them 24 hours to respond.

The subcommittee reviews all relevant documents, determines what questions should be asked and interviews personnel as needed. The subcommittee discusses their findings, and the coordinator drafts a report, which the subcommittee reviews and revises, as needed, prior to signing.

If the investigation by the subcommittee indicates that the complaint is unsupported, the complaint and all relevant information will be presented at the next meeting of the IACUC and recorded in the minutes. The Chair will notify the IO, all involved individuals and associated administrators of the IACUC's determination.

If the investigation reveals the concerns are valid, the Chair will brief the IO and a meeting of the IACUC will be scheduled to discuss the recommended actions. Following the IACUC meeting a report from the IACUC will be provided to the IO.

How the IACUC reports concerns and relates findings and recommendations to the Institutional Official. The IACUC Chair will notify the IO of the findings of the IACUC and recommended actions via a letter.

5) Make written recommendations to the Institutional Official regarding any aspect of the Institution's animal program, facilities, or personnel training. The procedures for making recommendations to the Institutional Official are as follows:

During committee meetings, the Chair or any IACUC member may make a motion to provide a written recommendation to the IO. If the motion carries, the document is drafted by the coordinator, reviewed by the Committee; and once agreed to by a majority a formal letter is signed by the Chair for the Committee and submitted to the IO. All written recommendations will also include a request that the IO inform the Committee of any subsequent action or the basis for rejection of the recommendation.

- 6) Review and approve, require modifications in (to secure approval), or withhold approval of PHS-supported activities related to the care and use of animals according to PHS Policy IV.C.1-3. The IACUC procedures for protocol review are as follows:
 - How protocols are received. Protocols are received via email.
 - The pre-review or initial screening process, if one is used. Initial screening confirms completion of all relevant portions of the application and submission of any related documents, such as SOPs or collection permits.
 - How members are notified. A polling form is emailed with the submission to every member of the IACUC.
 - How materials are distributed to members. Email is used to distribute PDF documents and review forms for designated member review. For items reviewed during a committee meeting, documents are distributed prior to the meeting via email and a paper copy is provided at the time of the meeting.
 - How meetings are conducted. A quorum of the committee meets face to face.
 - The methods of protocol review (full committee and/or designated member), including a description of the process and possible outcomes. Protocols may be reviewed either at a full committee meeting or via designated member review. All protocols are sent to the committee via email. Each member has 5 business days to determine if the protocol is appropriate for designated member review or requires full committee review. If any member calls for full committee review, a committee meeting will be scheduled. If no one calls for a full committee review and a majority of the committee indicates that designated member review is appropriate, the assistant or the coordinator requests assignment of a designated reviewer by the Chair.

Full committee Review - When a full committee review is requested via polling of the committee, the investigator will be notified. If questions are available prior to the meeting, the investigator will be given the opportunity to address the concerns and provide revisions or responses for use at the meeting. A quorum must be present; the chair will call the meeting to order and introduce the Animal Procedure Statement to be reviewed and the reason for the full committee review. If there are questions for the investigator or study director, he or she will be invited to join the meeting in person or via teleconference or other form of electronic communication. The investigator and/or study director will be provided the opportunity to address all the questions of the committee. After dismissing the investigator and study director, the Chair will request discussion on concerns about the procedures and animal welfare. If there are no revisions required, the committee will vote to approve or withhold approval. Anyone not voting to approve will have the option to submit a minority view. If minor revisions are required, the committee will vote to allow a designated member review (dmr) the additional information. If the changes are substantive, the revisions will be polled with the committee to determine full committee or designated member review. The Chair or Coordinator will send the revision request via email to the study director or investigator and notify him or her if the Animal Procedure Statement will return to polling. The Chair will choose the designated member to review the revisions, if necessary. If the reviewer and Chair determine the revisions satisfy the requirements of the committee, approval will be granted. When approval is granted, the Coordinator or assistant emails the approval notice. Should it be necessary to deny approval, a memo stating such and the reason for denial will be sent to the investigator or study director. The investigator will be provided the opportunity to respond to the IACUC either in writing or in person. While it may be necessary to deny approval, the IACUC strives to work with all investigators to identify modifications that will allow the IACUC to approve a research project.

<u>Designated Member Review</u> – After polling for 5 business days and a majority of the committee has determined that designated member review is appropriate, and no one

has called for full committee review, the Chair choses a committee member with the expertise and knowledge necessary to review the Animal Procedure Statement. The Assistant/Coordinator emails the APS and a review checklist to the reviewer. The designated reviewer has 2 business days to complete the review. The Assistant/Coordinator reviews the checklist for completion and revision requests. If the reviewer has requested revisions or clarifications, the Assistant/Coordinator will request these from either the investigator or the study director. Upon the receipt of the information, the Assistant/Coordinator forwards it to the reviewer, who confirms the information appropriately addresses the concerns. When the reviewer's requirements are met, the review and additional information are forwarded to the Chair for final approval. The Assistant/Coordinator sends the approval notice via email. The designated reviewer has the option to call for a full committee review at any time during the review process.

- during the review process.

 How conflicts of interest are handled. When a conflict of interest occurs within the committee, the member involved openly declares it at the beginning of discussion.
 - The member is allowed to provide information as needed by the committee, but not allowed to vote on the item(s), either approval of Animal Procedure Statements or Standard Operating Procedures.
- The voting process. After discussion, a motion to approve or request modifications for approval is made by a member. Another member seconds the motion, and the Chair requests a show of hands from those in favor, against, and abstaining. The numbers of each are recorded in the minutes. Individual identities are not recorded in the minutes.
- Also, include descriptions of any alternate processes or procedures for special or expedited reviews. In order to expedite a review, the committee will allow a designated member review to begin during the initial committee polling. Approval cannot be granted until the 5 days for initial polling is complete and no one calls for Full Committee Review, or every active member has indicated that designated member review is appropriate.

The IACUC allows members to be inactive or on sabbatical from the committee for a period of up to 3-6 months. This may be necessary for members with university academic 9 month appointments, persons on sabbatical, vacations, out of the country with no internet access or severe illness. The IACUC will allow a maximum of 30% of its members to be inactive during the same time interval. The committee will maintain proper constitution within the active members, while the quorum number is reduced. If the committee is not properly constituted due to inactive members, a committee member desires a longer period of inactivity or more than 30% of the committee will be inactive in a time interval, the Chair will request the appointment of alternate, appropriately qualified members by the Vice President for Research, Innovation, and Economic Development to maintain a properly constituted committee for official IACUC function.

7) Review and approve, require modifications in (to secure approval), or withhold approval of proposed significant changes regarding the use of animals in ongoing activities according to PHS Policy IV.C. The IACUC procedures for reviewing proposed significant changes in ongoing research projects are as follows:

Currently, we are transitioning to a new Animal Procedure Statement which will allow investigators to indicate that a significant change is being submitted within the current approval form. Changes will be highlighted and noted in fields collecting information about the need for the change. Approvals of Animal Procedure Statements on the old form will use the old addendum form.

Significant changes are submitted via email to the Assistant/Coordinator. An investigator is provided a list of significant changes requiring IACUC approval on each approval notice. IACUC review and approval via DMR or Full Committee (as above in III.D.6.) is required for the following significant changes:

- a. from non-survival to survival surgery;
- b. resulting in greater pain, distress, or degree of invasiveness;
- c. in housing and or use of animals in a location that is not part of the animal program overseen by the IACUC;
- d. in species;
- e. in study objectives;
- f. in Principal Investigator (PI); and
- g. that impact personnel safety

The following significant changes may be handled administratively in consultation with a Clinical Vet when an IACUC approved Standard Operating Procedure pertains to the change:

- a. anesthesia, analgesia, sedation, or experimental substances;
- b. euthanasia to any method approved in the <u>AVMA Guidelines for the Euthanasia of Animals</u>; and
- c. duration, frequency, type, or number of procedures performed on an animal.

Upon receipt of an addendum submission, the Assistant/Coordinator reviews the addendum request for completion and the level of review needed. When administrative handling in consultation with a clinical vet is used, the Coordinator confirms that the referenced SOPs have been reviewed within the last 3 years. The veterinarian confirms that the change in procedures will not adversely affect the animals and procedures are described in the SOP. The Chair confirms that proper review procedure was utilized. All confirmations are documented and provided to the investigator to notify that the requested changes are allowable.

As detailed in the IACUC reviewed and approved "Policy for Handling Changes to an IACUC-reviewed and -approved Animal Procedure Statement," other changes can be emailed to IACUC Staff and handled administratively without veterinary consultation. These include:

- a. a one-time 10% increase in animal numbers above the originally approved number
- b. correction of typographical errors;
- c. correction of grammar;
- d. contact information updates; and
- e. change in personnel, other than the PI. (**Note** There will be administrative review to ensure that all such personnel are appropriately identified, adequately trained and qualified, enrolled in occupational health and safety programs, and meet other criteria as required by the IACUC.)

All changes are documented as a revision of the originally approved APS and submitted to IACUC Staff. The IACUC Staff will verify that the changes meet the criteria for administrative handling. When Veterinarian Verification is required, the VVC routing form will accompany the document to collect electronic signatures confirming the verification process prior to notifying the PI that he/she is clear to proceed.

8) Notify investigators and the Institution in writing of its decision to approve or withhold approval of those activities related to the care and use of animals, or of modifications required to secure IACUC approval according to PHS Policy IV.C.4. The IACUC procedures to notify investigators and the Institution of its decisions regarding protocol review are as follows:

To notify the investigator or study director of the IACUC's decision of approval or withholding approval, the IACUC Coordinator or Assistant sends an email to the study director or investigator. Approvals will receive an approval notice attachment. When approval is withheld, the investigator or study director will be provided a written explanation of the committee's reasons for withholding approval and offered an opportunity to address the concerns in person, writing or through resubmission of a revised animal procedure statement. For items supported by an NIH or NSF grant, the approval or withholding of approval notice is also sent to the Director of the Office of Sponsored Programs Finance Administration and Compliance.

9) Conduct continuing review of each previously approved, ongoing activity covered by PHS Policy at appropriate intervals as determined by the IACUC, including a complete review at least once every 3 years according to PHS Policy IV.C.1.-5. The IACUC procedures for conducting continuing reviews are as follows:

The IACUC has chosen to *de novo* review all animal procedure statements annually. The investigator is required to submit an application for annual renewal using the standard Animal Procedure Statement form, which includes a section for investigators to update the IACUC on the previous year's progress and animal use. Reviews proceed as described in III.D.6. Additional post approval monitoring is performed by comparing study protocols to the approved animal procedure statement for USDA regulated species. For non-regulated species, post approval monitoring is accomplished by attending departmental research seminars, random laboratory walk through, and questions during semiannual inspections.

10) Be authorized to suspend an activity involving animals according to PHS Policy IV.C.6. The IACUC procedures for suspending an ongoing activity are as follows:

When evaluating an ongoing project involving PHS funded animals, if any of the following occurs:

- noncompliance with USDA or PHS Policy
- failure to conform to specifications of the approved Animal Procedure Statement
- failure to comply with the Institution's Animal Welfare Assurance
- unjustified morbidity/mortality of animal subjects
- report of concerns involving the care and use of study animals
- 1) The investigator will be given an opportunity to respond to the allegation(s) in writing.
- 2) An investigation will also take place as set forth in D. 4. above.
- 3) If the outcome of the investigation supports suspension of the project, the Chair will inform the IO and the investigator in writing of the possibility of suspension, and call a full IACUC meeting to review the case for suspension. The investigator and IO will be invited to attend and discuss the concerns of the Committee.
- 4) The Committee in closed session will vote to suspend, or not suspend but request modifications for evaluation prior to implementation in the project. Approval of any modifications to ongoing projects must occur prior to implementation. A majority vote

of a quorum of the Committee will be required for suspension. The minority view, if any, will be recorded.

- 5) The vote of the Committee will be reported in writing to the investigator and the IO. If the IACUC suspends an activity involving animals, the Institutional Official in consultation with the IACUC shall review the reasons for suspension, take appropriate corrective action, and report that action with a full explanation to OLAW.
- E. The risk-based occupational health and safety program for personnel working in laboratory animal facilities and personnel who have frequent contact with animals is as follows:
 - Control and prevention strategies.

UL Lafayette-NIRC screens all staff, faculty and students that come in contact with animals or their tissues prior to initial employment and either annually or biannually thereafter and at the termination of employment. The initial screening is an inquiry of pre-existing conditions, injuries, and illnesses. A health history and evaluation are required prior to fit testing employees for use of a respirator. All personnel are screened twice annually by tuberculin skin test and must provide evidence of measles vaccination or submit to measles serology testing. If necessary measles vaccination is offered. Tetanus vaccines are offered as required by specific projects and as indicated post-injury.

Safe work practices are used to reduce the potential for physical injury to employees. They include but are not limited to: instruction on the importance of standard precautions in handling all body fluids; safe sharps handling (i.e. sharps disposal boxes in near proximity to the task being performed, the use of hand guards for transfer of blood from syringes/needles to vacutainer tubes, and never recap a needle); required long sleeve garments in animal areas to protect the arms from minor bites and scratches; required use of thick restraint gloves for use of the pole and collar manipulation of unsedated animals; required eye and face protection at all times for employees in or near animal areas; required glove usage for handling animals and/or animal body fluids and tissues (including cleaning cages or feeding).

Eating, Drinking, and Smoking Policies

Standard operating procedures are in place to address the issue of eating, drinking, and smoking in animal facilities. These SOPs state: at no time, are employees, and /or visiting personnel, permitted to eat, drink, or utilize tobacco products in lab animal rooms, outdoor animal colonies or adjacent service areas. There are break-rooms provided for employee eating and drinking.

Safety Meetings

Employees are continually reminded of the need for safe work practices by regular safety meetings and formal classes. During these classes the employees are given the facts about the animals they are working with and the tools to protect themselves from the hazards posed by the animals, such as devices that make blood-drawing safer, i.e. hand guards, self-blunting and self-sheathing needles, plastic vacutainer tubes and hemoguard closures on vacutainer tubes.

- Hazard identification and risk assessment.

The staff of the New Iberia Research Center may encounter hazards during their work that could be biological, physical or chemical in nature. Biological hazards are encountered either through zoonotic diseases or protocol related hazards. Physical hazards are encountered in many different ways, such as, equipment hazards, animal related hazards, and electrical hazards. Chemical hazards are primarily encountered through animal husbandry procedures and processing of tissues in the laboratory.

During the hazard identification and risk assessment process the input of everyone from senior staff to veterinarians to animal caretakers is requested to formulate the best safety measures to minimize the hazard. From engineering out the hazard, to training, to the use of PPE, employees are protected from injury either physically or with the knowledge necessary to perform their tasks safely.

Hazard identification and risk assessment are an ongoing process. The New Iberia Research Center safeguards the health of employees by identifying and evaluating potential hazards in the workplace. These hazards are identified through study and/or facility audits conducted by the Quality Assurance Unit. Employees are observed for their ability to follow health and safety Standard Operating Procedures. Work processes are observed for possible process improvements. The work environment is observed for safety hazards that can be chemical and electrical in nature. In use equipment is observed to ensure proper functioning and safe operation by the employee. After an assessment is completed, a report is sent to the NIRC Director and the applicable Division Head of the employee and/or area observed. This report discusses the findings and recommendations for improvement in the area. All employees are encouraged to report unsafe situations or unsafe acts they may encounter while performing their work tasks to their supervisor or the Division of Occupational Services.

In addition to the periodic safety assessments, the process involves other levels of identification and assessment to identify areas of concern not identified in the safety assessment. Injury reports are compiled and trends are identified. With the input of the people involved in the processes, procedural or process improvements are made to reduce the hazard causing the injury. Employees are also encouraged to report unsafe practices before an injury occurs or to develop new procedures, approved by the supervisor or the Division of Occupational Services, for the hazards they encounter. Safety related Standard Operating Procedures are reviewed and revised yearly or as necessary to ensure that the procedure is workable and it is the best way for the hazard to be minimized.

The CDC manual "Biosafety in Microbiological and Biomedical Laboratories" is the basis for the NIRC Biosafety Manual. The animals at the New Iberia Research Center are housed and cared for according to this manual. Levels of personnel exposure to hazardous agents are assessed by determining the test article the employees are exposed to and then referring to the CDC manual's Agent Summary Statements for the appropriate biosafety level that should be used. If an animal is infected with a biosafety level 2 agent, that animal is housed and cared for according to the animal biosafety level 2 requirements in the NIRC Biosafety Manual. Special characteristics of the test article (infectious nature, volatile substances, aerosols, etc.) are considered prior to placement of the test system in a study room. Personnel are chosen for enrollment into specific areas of the health and safety program according to possible hazards the employee may encounter in performing work tasks with the test system and test article. For example, respiratory protection program enrollment for personnel working in the CDC quarantine facility is mandatory.

- Facilities, equipment, and monitoring

All employees working with animal tissue and/or fluid are required to shower out before leaving the facility. The table below lists locations and specifications of the shower and change facilities.

Location	Use	Showers	Sinks	Toilets	Urinals
(b) (4)		0	1	1	0
	Men Shower	2	4	2	0

Location	Use	Showers	Sinks	Toilets	Urinals
(b) (4)	Men Locker	0	0	0	0
	Men Shower	2	2	2	0
		1	1	0	0
	Women	1	1	1	0
		0	1	1	0
	Men	2	1	1	0
	Women	2	1	1	0
	Men	2	1	1	0
	Women	2	1	1	0
	Men	0	3	2	0
	Women	0	2	2	0
	Women	3	2	2	0
	Men	3	3	3	3
	Men	2	2	2	0
	Women	2	2	2	0
		0	1	1	0
	Men	0	2	2	2
	Women	0	2	3	2
	Men Shower	3	3	3	0
	Men Locker	0	0	0	3
	Women Shower	3	3	3	0
	Women Locker	0	0	0	0
		0	1	1	0
	Women Shower	2	2	2	0
	Women Locker	0	0	0	0
		0	1	1	0
	Men	1	2	1	0
		2	2	2	0
	Men	1	1	1	0
	Women	1	1	1	0
	Men	0	3	2	4
	Women	0	3	5	0
		0	1	1	0
	Men Shower	3	1	1	0
	Men Toilet	0	3	3	2
	Women Shower	3	1	1	0
	Women Toilet	0	3	3	0
	Men	2	1	1	0
	Women	2	2	1	0
	Women	1	1	1	0
		1	1	1	0
	Men	1	1	1	0
	Women	1	1	1	0
	Men	1	1	1	0

Location	Use	Showers	Sinks	Toilets	Urinals
(b) (4)	Women	1	1	1	0
	Men	2	2	2	0
	Women	2	2	2	0
		1	1	1	0
		0	0	0	0
	Men	2	2	1	1
	Women	2	2	2	0
	Men	2	2	1	1
	Women	2	2	2	0
Totals		66	86	80	18

Description of Housing and Care for Animals Exposed to Hazardous Agents

The program for housing and caring for animals exposed experimentally to hazardous agents is developed according to the recommendations of the CDC/NIH manual, "Biosafety in Microbiological and Biomedical Laboratories", for animal biosafety levels. Animals on different studies are not housed in the same room while on study. In general, the animals are housed according to Standard Operating Procedures that are in place for all indoor animals, due to the fact that the indoor housing areas are already following the animal biosafety guidelines. The program for special housing is used only for those animals that must be handled with biosafety level 3 practices. This program consists of personal protective equipment requirements such as Tyvek fluid resistant coveralls over standard uniform before entry, Kevlar gloves with double latex gloves before entry, N-95 respirator use and faceshields with safety glasses or goggles. Other requirements include showering after exiting the biohazard area and waste processing immediately upon The entry doors into the areas are electronically controlled with access permitted only to those employees completing the necessary training requirements. Employees must attend multiple training sessions before being allowed to enter or care for the animals in these special areas. Training includes general biosafety, respiratory protection, zoonotic diseases, quarantine shipment and agent specific study meetings.

- Personnel training

All new employees must complete a general safety orientation session, conducted by the Division of Occupational Services, before performing assigned duties. The session also provides an orientation to working with infectious agents and non-human primates. Discussed are the Center's Bloodborne Pathogen Exposure Control Plan and Standard Operating Procedures that pertain to the employee's safety and health. The Standard Operating Procedures address topics such as:

- Proper personal protective equipment usage
- Sharps handling and disposal
- Chemical handling and safety
- Hazardous waste disposal
- Latex allergy awareness
- Hand washing importance
- Injury / exposure reporting.

Supervisors then provide division specific employee training in regard to job specific safety related Standard Operating Procedures. They review once again the issuance, care, and use of personal protective equipment; sharps handling; health surveillance procedures; reporting accidents and exposure related incidents; and basic safe work practices. Safe

work practices include but are not limited to: safe sharps handling (e.g. sharps disposal boxes in near proximity to the task being performed, the use of hand guards for transfer of blood from syringes/needles to vacutainer tubes, and never recap a needle); required long sleeve garments in animal areas to protect the arms from minor bites and scratches; required use of thick restraint gloves for use of the pole and collar manipulation of unsedated animals; required eye and face protection at all times for employees in or near animal areas; required glove usage for handling animals and/or animal body fluids and tissues (including cleaning cages or feeding).

The employee's general safety training is required to be updated at least annually. All personnel are required to attend a zoonosis and bloodborne pathogen training class conducted by the Division of Occupational Services. This training covers symptoms, treatment, and prevention of diseases such as:

- Herpes B
- Tuberculosis
- Rabies
- Measles
- Hepatitis B and C
- HIV
- Salmonella
- Shigella
- And other primate related zoonoses.

The training session also stresses the importance of cleansing and reporting exposurerelated injuries and the importance of hygiene in the prevention of the above diseases. The session is conducted using a variety of training methods including lecture, videotape, and question and answer period.

Personnel are required to attend a safety training and awareness class as part of a 12-week training session, which also includes aspects of protocol conduct, primate disease recognition, nutrition, environmental enrichment, humane animal treatment, and husbandry.

Employees must participate in quarterly safety meetings addressing topics chosen by the Division of Occupational Services such as chemical handling and use, personal protective equipment care and usage, and injury prevention and reporting.

Hazardous Agent Training includes the following:

- a. Employees working in the CDC quarantine facility attend a training session before each quarantine shipment arrives. The employee is trained on the special safety procedures required when working with quarantine animals such as the need for Tyvek coveralls; N-95 respirators; and reporting a fever of greater than 101.3 or any scratch, bite, and mucous membrane exposure to the occupational health nurse immediately.
- b. Each employee required to wear an N-95 respirator participates in the facility respiratory protection program. This program is governed by SOPs and includes fit testing and training in the limitations and proper use of respirators. Employees are retrained and fit-tested a minimum of annually.

c. Employees are specifically trained by the study director, or designee, whenever a hazardous substance classified as biosafety level 2 or above is introduced, or a procedure or policy change is instituted that affects the hazards posed by a previously used substance. This training includes exposure routes, personal protective equipment usage, and special requirements for working with the hazardous agent or animal exposed to the agent.

- Personal hygiene

Sinks are located in or near all animal rooms, clinics, surgery suites, and necropsy areas. The importance and procedure describing appropriate handwashing technique is addressed in employee training sessions and facility SOPs. Employees change into the standard work uniform applicable for their assigned duties prior to reporting to that area. Employee lockers are provided for storage of street clothes and personal effects. Locker rooms include shower facilities. Employees are required to shower and change back into their personal street clothes prior to leaving the facility. Standard uniforms (including designated footwear) are not permitted outside of the facility.

- Animal experimentation involving hazards

Description of Institutional Policies

The New Iberia Research Center has an Institutional Animal Care and Use Committee that oversees the use of animals with hazardous biologic, chemical, and physical agents. The Institutional Biosafety Committee also reviews protocols for studies involving recombinanat DNA, Select Agent and other biological agents. The NIRC Biosafety Manual is also used as a tool in assessing experimentation with biohazardous agents.

Description of Oversight Process and Husbandry Practices

Supervisors are responsible for overseeing the work practices of employees under their supervision. All employees are required to wear the standard uniform including PPE when in the proximity of a non-human primate, whether that animal has been exposed to hazardous agents or not. Employees working in the quarantine animal area wear Tyvek coveralls with boots and hood, as well as N-95 respirators and goggles because of the unknown hazards that they may encounter, such as Tuberculosis. They are required to shower before leaving the quarantine area. Employees working in BSL 2 areas are also required to wear additional PPE according to the infectious nature of the test material being used including, but not limited to, Tyvek coveralls and N-95 respirators.

Containment of Hazardous Agents

Biological agents such as test material are kept in their original container or if transferred to another container, the container must be labeled using the substance name, chemical abstract number or code number, batch number, the date of expiration, and storage conditions, if applicable. Hazardous agents are not stored in animal rooms or animal support areas. These agents are stored in designated areas in the Clinical Pathology Lab only.

Scavenging of Anesthetic Gases

All volatile anesthetic agents are utilized in well-ventilated areas. The surgical suite in Building 28 has a direct exhaust system whereby waste gases are directly vented to the outside. Tubing connects the exhaust port on the anesthesia machine to the GAS-VAK® exhaust unit, which then blows the gases into the room air exhaust and out of the building by way of vents on the roof. The other anesthesia machines utilize F/AIR canisters to scavenge waste gases. These canisters are changed regularly (SOP C-40.01).

- Personal protection

UL Lafayette-NIRC employees working directly with non-human primates or their tissue or fluid wear the standard uniform consisting of coverall or scrubs, long sleeve outer jacket, rubber or non-porous washable footwear, face protection (Bionic Shield, goggles and face masks or respirators) and disposable gloves. Employees are not allowed to wear street clothes in primate areas. All uniform clothing is laundered on site. The clothing is bagged at the point of removal and is transported to the laundry room where it is handled with minimal agitation. For those employees working in BSL2 or higher conditions that require a fluid impervious barrier, Tyvek coveralls are provided. The coverall is removed and disposed of upon leaving the hazardous area.

Medical evaluation and preventive medicine for personnel

Occupational Health and Safety Program

The UL-Lafayette NIRC Occupational Health Program follows the National Research Council recommendations for a periodic medical surveillance program in the following ways. The NIRC Medical Surveillance program is available to all NIRC employees including maintenance and administrative personnel. Work-study students, volunteers and anyone who encounters animals or animal tissue/body fluids on a regular basis are also included in the occupational health program. The risks of an employee encountering biological, physical and chemical hazards in their daily job tasks are assessed when deciding which surveillance procedures are appropriate for a specific employee working in a specific area. Also a factor in deciding appropriate surveillance, is the protocol or program requirement for employees working in the area. All records of immunizations and other medical surveillance procedures are kept in the employee's medical folders. The following table details periodic medical surveillance done for NIRC employees. numbers correspond to specific animal programs.

	Veterinary	Behavioral	Research	Animal	Maintenance
	Sciences	Sciences	Resources	Resources	
Monthly blood test	8723	8723	8723	8723	8723
Yearly serum archive	All	All	All	All	All
Semi- annual TB test***	All	All	All	All	All
Hepatitis B vaccine**	All	All	All	Custodians, chimp crew	According to risk
Hepatitis A vaccine	8723	8723	8723	8723	8723
Tetanus	8746/56, 8723 and after high risk injury	8746/56, 8723 and after high risk injury			
Measles Titer	8746/56, 8723	8746/56, 8723	8746/56, 8723	8746/56, 8723	8746/56, 8723
Polio Titer	8746/56, 8723, polio area	8746/56, 8723, polio area	8746/56, 8723, polio area	8746/56, 8723, polio area	8746/56, 8723, polio area
Physical Exam	8723	8723	8723	8723	8723
X-ray badge evaluation	Anyone taking or		Anyone taking or	Anyone taking or	

	helping with		helping with	helping with	
	x-rays		x-rays	x-rays	
Notification	CDC	CDC	CDC	CDC	CDC
for fever	quarantine	quarantine	quarantine	quarantine	quarantine
over 101.3		-	-	-	
Respiratory	All	BSL 2 or 3	All	BSL 2 or 3	Painters, BSL
Protection*					2 or 3, those
					exposed to
					chemicals

- * Employees in the respiratory protection program must obtain medical clearance prior to being fit-tested. Medical Clearance is reviewed once per year.
- ** Hepatitis B vaccine is offered to all employees exposed to experimentally or naturally infected animal blood or OPIM or human blood or OPIM.
- *** Those employees that are skin test positive are required to have a chest x-ray every year.

The occupational health and safety program at NIRC is driven primarily by Standard Operating Procedures. Standard Operating Procedures in place to ensure employee safety consist of personal protective equipment care and use, personal hygiene, chemical safety, sharps handling, accident and exposure incident reporting, respiratory protection program, and regular health surveillance. In addition, the Center has in place a Bloodborne Pathogen Exposure Control Plan in response to OSHA Bloodborne Pathogen Standard (29CFR 1910.1030) and the State of Louisiana's Office of Worker Protection as well as a Biosafety Manual. Monitoring of the program is the responsibility of the Division of Occupational Services.

All employees are trained, as part of orientation, and annually on the precautions to be taken when working with non-human primates. Personnel working with macaques are specifically instructed on the importance of reporting febrile illness, neurological symptoms and injuries whether or not an overt exposure has occurred. Personnel in all areas are trained during agent specific pre-study meetings on agent specific precautions required for immune-compromised individuals. Individuals are instructed to report to the on-site occupational health nurse if there are concerns or questions regarding their personal health status, including pregnancy, while working with non-human primates

Aspects Relating to Hazardous Agents

- Aspects That Apply To Personnel Potentially Exposed To Hazardous Agents:
 - For all NIRC employees, with the exception of administrative personnel, the health and safety program is focused on the unique hazards of working with non-human primates and special precautions needed for non-human primate handling and care. All personnel are considered to be potentially exposed to hazardous agents due to the risk for zoonotic disease transmission. There are specific personnel that work with more specialized hazardous materials. These employees may require additional monitoring or testing. Personnel exposed to formaldehyde participate in periodic aldehyde fixative monitoring to insure exposure levels are below those recommended by OSHA. Employees exposed to radiation (x-rays) wear dosimetry badges to ensure radiation exposure is within the NRC recommended limits. Employees working in quarantine must report a fever of greater than 101.3 °F or any scratch, bite, and/or mucous membrane exposure to the Division of Occupational Services immediately.
- Procedures for Reporting Exposures:

All employees with a potential exposure to infectious agents, whether it be a bite, scratch, needlestick, or mucus membrane splash are instructed on the proper cleaning of the injury site. The facility Standard Operating Procedures detail the procedure to follow in the case of an exposure incident. Follow-up procedures, conducted by the Division of Occupational Services, include serum testing and face-to-face interviews on a regular basis following the injury. Employees with an exposure-related incident, such as a scratch, bite, needlestick or mucus membrane splash, are counseled as to the symptoms and treatment of diseases such as Herpes B, Hepatitis B, Hepatitis C and HIV. If applicable to the injury, the employees are tested for the above diseases and are put on a follow-up schedule to ensure early recognition of signs and symptoms. Employees with suspicious signs or symptoms are immediately referred to the Center's physician who is knowledgeable regarding zoonotic diseases carried by non-human primates. All employees are encouraged to report unsafe situations or unsafe acts they may encounter while performing their work tasks to their supervisor or the Division of Occupational Services.

- Where appropriate, describe special precautions for personnel working with nonhuman primates.

All New Iberia Research Center employees work with non-human primates or their tissues/body fluids, with the exception of administrative personnel. Therefore, all personnel are included in the health and safety program.

- F. The total gross number of square feet in each animal facility (including each satellite facility), the species of animals housed there and the average daily inventory of animals, by species, in each facility is provided in the attached Facility and Species Inventory table.
- G. The training or instruction available to scientists, animal technicians, and other personnel involved in animal care, treatment, or use is as follows:

All persons involved in animal care, treatment or use are offered the opportunity to complete the Humane Care and Use of Laboratory Animals online training module from LATAnet (http://hazel.forest.net/latanet/client/ull/introduction.htm), as well as, modules specific to the animal model in use and the Occupational Health and Safety module. Training on research or testing methods that minimize the number of animals required to obtain valid results and limit animal pain and distress is included in these modules. The link to this training is provided on two websites: the university Office of Research and Sponsored Programs IACUC website http://presearch.louisiana.edu/research-compliance/institutional-animal-care-and-use-committee/training-investigators-and-animal and the New Iberia Research Center IACUC website http://nirc.louisiana.edu/about/iacuc.html.

1. Animal Care Technician Training:

Initial Orientation of newly hired personnel is required to be documented as completed within 90 days of the employment date:

- Facility introduction to UL Lafayette-NIRC
- Bio-safety procedures to insure employee: health screening prior to employment, review of safety SOPs, zoonosis training, and review of Bloodborne Pathogen Exposure Control Plan.
- Issuance, limitations, and proper use of personal protective equipment, engineering controls and safety equipment (Division specific)
- Standard Operating Procedure familiarization including a statement of understanding and utilization of SOPs signed by each employee
- Information Systems (if applicable) to facilitate data entry and use of email, locally generated software and commercial software suites
- Good Laboratory Practice (GLP) training including and introduction to the GLPs, SOPs, and documentation practices

Driver safety training prior to use of University vehicles

Animal Care personnel participate in job specific training designed to provide adequate education, experience and skilled supervisory oversight to perform assigned duties. Documentation in skill certification is accomplished that reflects task performance in accordance with SOP's. Requirements for job specific training, criteria used in determining skill certification, and documentation are the responsibility of each Division Head for their respective division. Skill re-certification and appropriate documentation is accomplished annually or as indicated by task/job performance. Conditions mandating recertification may include assigned procedures requiring skills not performed in the past 12 months, significantly changed or revised technical procedures necessary for performance of a skill, and/or if deemed indicated at the discretion of supervisory personnel.

Division of Animal Resources personnel are mandated to successfully complete a formal Technician Training Program designed to provide basic knowledge and understanding of laboratory animal care. Topics include:

- Introduction, General Regulations, Regulatory Agencies
- Animal Environment
- Sanitation and Safe Chemical Handling
- GLP Training
- Animal Handling and Restraint / Escape and Containment / Emergency Preparedness
- Zoonosis
- Safety
- Recognizing Disease
- Primate Physiological Well-being and Enrichment
- Non-human Primates
- Exam
- Humane care of NHP, General Regulations, Regulatory agencies
- Review of UL Lafayette policies on personnel grievances, sexual harassment, violence free workplace, smoke free workplace, and PHS Assurance statement regarding employee right to report animal welfare concerns to the IACUC.

Animal care preparatory course provides candidate laboratory animal technicians with 17 hours of instruction in preparation for the AALAS certification exam at the ALAT level.

General Training and Educational opportunities to facility wide personnel include:

- Quarterly Training--Safety meetings topics are selected by Safety Officer
- Annual Training to include:
 - Zoonosis
 - Bloodborne Pathogen Exposure Control
 - Good Laboratory Practice Regulations Quality Assurance Unit
 - Biosafety BSL2 (If applicable)
 - Chemical safety (job specific by supervisory personnel)
- Attendance at AALAS and LA Branch AALAS meetings
- Initial/Refresher at every 3 years:
 - Driver safety
 - Forklift safety
- 2. Veterinary Staff:

Veterinary:

Veterinary training for surgery consists of the scholastic training obtained through veterinary school curricula and that obtained through continuing education workshops (ie. laproscopic techniques). Additionally, outside consultation with human and veterinary oral surgeons and plastic surgeons has been sought on specific complex cases. Specific techniques required for study support performed by the assigned veterinarian are learned through training by the sponsor or by workshop as needed.

Veterinary Technician:

Technicians within the Division of Veterinary Science obtain training for minor surgical procedures and surgical support functions, through three mechanisms:

- 1) Training by certified personnel Where the technician is instructed in proper procedure, assisted and observed during the mastery of the skill by certified personnel. Skill certificates are awarded to personnel who demonstrate proper procedure. Procedures in which "skill certification" may be obtained:
 - Endoscopy: Demonstrates knowledge and proficiency in maintenance of the Olympus Fibroscope (SOP C-07.02).
 - Liver biopsy: demonstrates knowledge of liver biopsy performance. Assists with or performs under supervision (SOP C13).
 - Animal sedation
 - Use of IVAC Electronic Thermometer (SOP C-23).
 - Heart Rate Monitoring (SOP C-27.01)
 - Respiratory Rate Monitoring (SOP C-27.01)
 - Blood Pressure Monitoring (SOP C-37)
 - Anesthesia Induction
 - Inhalant anesthesia maintenance and monitoring
 - EKG (SOP C-18)
 - Welch Allyn vital signs monitor (C-37)
 - Dental pulpectomy (SOP C-14)
 - Aseptic technique
 - Minor surgery: suturing of minor lacerations
 - Tail amputations
 - Daily clinical observations
- 2) NIRC Surgical Support Classes Training for surgical support procedures (ie. anesthesia machine checks and soda lime maintenance) is done through a class provided for the veterinary technicians taught by various UL Lafayette-NIRC veterinarians. Documentation of attendance is maintained in the training files for each technician. The following classes are taught through the Division of Veterinary Science:
 - Surgical pack preparation and autoclaving
 - Soda Lime maintenance
 - Anesthesia Machine checks
 - •Suturing—Videotape: narrated by Dr. Ralph Henderson, Auburn University School of Veterinary Medicine, 1994.
- 3) Continuing education or outside training is arranged and provided for technicians requiring training in specific surgical techniques intended for study support (ie. biopsy techniques, assistance with laporotomy).

Documentation of training, in the form of certificates and class attendance sheets, are maintained in the UL Lafayette-NIRC personnel training files. Veterinarians are

responsible for supervision of personnel responsible for training in minor procedures and provide oversight of certification.

3. Research Staff:

An online training program is utilized to provide training, in accordance with USDA regulations, to all IACUC members, research investigators, study directors, study veterinarians, study coordinators and all research technicians. The program consists of successful completion of the Base Module and the Species Module (The humane care and use of laboratory nonhuman primates in the case of investigators who access nonhuman primate models). Should the research involve any species other than nonhuman primates, the appropriate species module is completed. (An exception is unusual species such as amphibians or wild animals). The following guidelines have been established for University faculty and staff:

All scientists and personnel complete the training program prior to the initiation of research. All IACUC members complete the program at the beginning of IACUC service. New IACUC members also complete a face to face training with the Chair or Coordinator, where they are introduced to the UL Lafayette Assurance, animal research policies and documents, functions of the IACUC and provided reference material to assist with their assessment of animal procedure statements. All persons developing or assessing animal procedure statements are encouraged to consult the Chair or the Coordinator for assistance at any time.

4. IACUC personnel:

New members are provided an orientation, which introduces the procedures of protocol review, reference documents, books, electronic links to the Animal Welfare Act and Regulations, functions and requirements that the committee fulfills. New members are also provided a copy of the Guide, the PHS policy and the Institutional Animal Care and Use Guidebook. All IACUC members are provided a copy of the approved Animal Welfare Assurance and encouraged to read it, as well as, strongly encouraged to complete the online LATAnet training modules and to refer to them as needed. All committee members are offered the opportunity to attend live OLAW webinars or review them when posted online.

IV. Institutional Program Evaluation and Accreditation

All of this Institution's programs and facilities (including satellite facilities) for activities involving animals have been evaluated by the IACUC within the past 6 months and will be reevaluated by the IACUC at least once every 6 months according to PHS Policy IV.B.1.-2. Reports have been and will continue to be prepared according to PHS Policy IV.B.3. All IACUC semiannual reports will include a description of the nature and extent of this Institution's adherence to the PHS Policy and the *Guide*. Any departures from the *Guide* will be identified specifically and reasons for each departure will be stated. Reports will distinguish significant deficiencies from minor deficiencies. Where program or facility deficiencies are noted, reports will contain a reasonable and specific plan and schedule for correcting each deficiency. Semiannual reports of the IACUC's evaluations will be submitted to the Institutional Official. Semiannual reports of IACUC evaluations will be maintained by this Institution and made available to the OLAW upon request.

(1) This Institution is Category 1 — accredited by the <u>Association for Assessment and Accreditation of Laboratory Animal Care International (AAALAC)</u>

As noted above, reports of the IACUC's semiannual evaluations (program reviews and facility inspections) will be made available upon request.

V. Recordkeeping Requirements

- A. This Institution will maintain for at least 3 years:
 - 1. A copy of this Assurance and any modifications made to it, as approved by the PHS
 - 2. Minutes of IACUC meetings, including records of attendance, activities of the committee, and committee deliberations
 - 3. Records of applications, proposals, and proposed significant changes in the care and use of animals and whether IACUC approval was granted or withheld
 - 4. Records of semiannual IACUC reports and recommendations (including minority views) as forwarded to the Institutional Official, Vice President for Research, Innovation, and Economic Development.
 - 5. Records of accrediting body determinations
- B. This Institution will maintain records that relate directly to applications, proposals, and proposed changes in ongoing activities reviewed and approved by the IACUC for the duration of the activity and for an additional 3 years after completion of the activity.
- C. All records shall be accessible for inspection and copying by authorized OLAW or other PHS representatives at reasonable times and in a reasonable manner.

VI. Reporting Requirements

- A. The Institutional reporting period is the calendar year (January 1 December 31). The IACUC, through the Institutional Official, will submit an annual report to OLAW by January 31 of each year. The annual report will include:
 - 1. Any change in the accreditation status of the Institution (e.g., if the Institution obtains accreditation by AAALAC or AAALAC accreditation is revoked)
 - 2. Any change in the description of the Institution's program for animal care and use as described in this Assurance
 - 3. Any change in the IACUC membership
 - 4. Notification of the dates that the IACUC conducted its semiannual evaluations of the Institution's program and facilities (including satellite facilities) and submitted the evaluations to the Institutional Official, Vice President for Research, Innovation, and Economic Development.
 - 5. Any minority views filed by members of the IACUC
- B. The IACUC, through the Institutional Official, will promptly provide OLAW with a full explanation of the circumstances and actions taken with respect to:
 - 1. Any serious or continuing noncompliance with the PHS Policy
 - 2. Any serious deviations from the provisions of the Guide
 - 3. Any suspension of an activity by the IACUC
- C. Reports filed under VI.A. and VI.B. above should include any minority views filed by members of the IACUC.

VII. Institutional Endorsement and PHS Approval

A. Author	rized Institutional Official	
Name: I	Ramesh Kolluru	
Title: Vice	e President for Research, Innov	ation, and Economic Development
Name of Ir	nstitution: University of Louisiar	na at Lafayette
P.O. Box 4	street, city, state, country, post sity Circle, (b) (4) 3610 LA 70504-3610	tal code)
Phone:	(ъ) (б)	Fax: (b) (6)
E-mall: r	xk6962@loulsiana.edu	
the Institut	tion's responsibilities under this specified above.	on behalf of this Institution and with an understanding of Assurance, I assure the humane care and use of
Signature:	(b) (6)	Date: 9/19/2016
Dore Offic Nati Beth bart Pho	cen H. Bartlett - Senior Assurance of Laboratory Animal Welfard onal Institutes of Health nesda, MD 20892-7982 cletd@mail.nih.gov ne: 301-402-4325	e Officer
Signature		Date: 9/19/16
Assurance	Number: D16 - 000	316 (A3029-01)
Effective D	Date: 9/19/16	Expiration Date: 9/30/20

VIII. Membership of the IACUC

Date: July 1, 2016							
Name of Institution: University of Louisiana at Lafayette							
Assurance Number: A3029-01							
IACUC Chairperson							
Name*: Ruth Landry							
Title*: Head, Division Sp	oonsored Programs		Degree/Cred	lentials*: MBA			
Address*: (street, city, s New Iberia Research C P.O. Box 13610 New Iberia, La 70562-3	enter						
E-mail*:rlandry@louisiar	na.edu						
Phone*: (b) (6)		Fax*	(b) (6)				
IACUC Roster							
Name of Member/ Code**	Degree/ Credentials	Position Titl	e***	PHS Policy Membership Requirements****			
D.L. Hasselschwert	MS, MS, DVM, ACLAM	Head, Divis Veterinary S	Sciences	Attending Veterinarian			
			(b) (6)	member			
				scientist			
				Scientist, veterinarian			
_				scientist			
_				scientist			
				veterinarian			
				nonscientist, nonaffiliated			
				Nonscientist, nonaffiliated			
				member			

^{*} This information is mandatory.

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 (e.g., 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.]

IX. Other Key Contacts (optional)

If there are other individuals within the Institution who may be contacted regarding this Assurance, please provide information below.

Contact #1	
Name: Dr. Dana Hasselschwert	
Title: Attending Veterinarian	
Phone: (b) (6)	E-mail: VM-Head@nirc.louisiana.edu
Contact #2	
	(b) (6)

^{**} Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this submission 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.

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

^{****} PHS Policy Membership Requirements:

X. Facility and Species Inventory

Date: May 23, 2016			
Name of Institution:	University of Louis	iana at Lafayette – New Iberia Rese	earch Center
Assurance Number:	A2039-01		
Laboratory, Unit, or Building*	Gross Square Feet [include service areas]	Species Housed [use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog]	Approximate Average Daily Inventory
(b) (4)	19744	Rhesus macaques	420
		Cynomolgous macaques	130
		Pigtail macaques	364
	13967	Pigtail macaques	0-200, currently 0
	30560	Cynomolgous macaques	100
	1542	Pigtail macaques	0
	47940	Rhesus macaques	953
	8232	Rhesus macaques	218
		African Green Monkeys	
	27429	Decommissioned	0
	5004	Rhesus macaques	60-100
	20292	African Green Monkeys	29
		Chimpanzee	107
	5538	Chimpanzee	60
	78754	Rhesus macaques	33
	1050	Rhesus macaques	0
	1050	Rhesus macaques	0
	72000	Rhesus macaques	1554
	1488	Rhesus macaques	16
	1821	Rhesus macaques	0
	8722	Rhesus macaques	40
		Pigtail macaque	0
		African Green monkeys	112
		Cynomolgous macaques	40
	26635	African Green monkeys	10
		Rhesus macaques	454
	205	African Green monkeys	0
	10435	African Green monkeys	206
	2544	Rhesus	50

(b) (4)	5462	African Green monkeys	247
	13700	African Green monkeys	239
		Rhesus macaques	246
	6043	Cynomolgous macaques	172
	17408	Cynomolgous macaques	133
	2513	Chimpanzee	0-12, currently 0
	8060	Chimpanzee	96
	12156	Rhesus	400
	6486	Rhesus macaques	284

^{*}Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.