

University of Washington
JUNE 15, 2023 IACUC Meeting Minutes

Members Present:	AB	ES	KG	MRB
		GS		MS
	AP	JFI	MB	
	CC		MK 2:34	
	DT	JS		
Members Absent:	AW	GL	MRK	SP
	DM	JPVH		

Opening Business

- The Floor was opened for public comment at 2:31 pm.
- The IACUC Chair called the meeting to order at 2:36 pm.

Confirmation of a Quorum and Announcement

- Quorum was confirmed by LM.

Approval of the IACUC Meeting Minutes

- The IACUC Chair called for the approval of the May 18, 2023 meeting minutes.
Motion was made and seconded: to approve the minutes as written.
Further Discussion: none
Vote: Approved with 11 members voting in favor, 0 against and 1 abstentions.

IACUC Training (GNAC) – CH

Gnotobiotic Facility (GNAC)- mice maintained in gnotobiotic condition (sterile mice- free of bacteria, viruses, fungi, etc)

- Requesting to continue exception to change top, water bottle, etc as needed; bedding still changed every week
- IsoCage bioexclusion system has air HEPA-filtered twice on way in, once on way out; hermetically sealed so only exposed to sterile air
- QUESTIONS:
 - *cages changed as needed- timeline? A: Can stay indefinitely or if bubble gets contaminated, if there's residue buildup, broken components; as long as everything remains sterile it can go for years; test for bacteria every quarter*

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Standard Operation Procedures (GNAC) – JFI

Gnotobiotic Animal Core (GNAC) Care and Maintenance of Mice (SOP) was presented for review and available in the meeting folder.

Motion was made and seconded: to approve the SOP as written.

Further Discussion: none

Vote: Approved with 12 members voting in favor, 0 against, 0 abstentions.

Attending Veterinarian’s Report – CC

No reportable animal events

23 protocols with enhanced veterinary monitoring; of 23 protocols 9 performing procedures they’re on monitoring for.

Recent accomplishment: LAWTE award “Top Performance Award” for CLATR in recognition of the multi-organizational Tunnel Handling Event.

Announcement: The UW Office of Provost and Office of Research are supporting initiative to support the 3 R’s and will offer funding to project proposals; looking for a team to help determine those awards.

OAW Director’s Report – JFI

IACUC metrics – IACUC metrics are in the meeting folder

Noncompliance –

4045-02 On May 8th 2023, an antelope ground squirrel underwent a survival surgery to implant an intraperitoneal temperature sensor. This surgery is approved on the protocol. The following day the surgeon noted that a skin suture was missing and proceeded to re-anesthetize the animal and perform a surgical repair of the wound. This repair surgery was not approved on the IACUC protocol. General and local anesthesia, as well as post-operative analgesia, was provided as approved in their protocol for the implant surgery. On May 11th, 2 days following the repair surgery, the surgeon again noted re-opening of the wound, at which time they immediately contacted veterinary services. Following assessment by a veterinarian, the animal was humanely euthanized.

During review of the protocol subsequent to the event, a few other noncompliances were identified that occurred during the initial surgical event, specifically the type of suture used for skin and abdominal wall closure, and the use of vetbond surgical glue on top of the sutures after skin closure. These unapproved techniques had been applied to a total of 18 animals that underwent survival surgery over a 4 day period, however the unapproved repair surgery was only performed on the single animal. Although 6 of the 18 animals did experience some sort of post-operative complication, those complications are not clearly attributable to the closure technique, and the other 5 animals were reported to veterinary services and managed by veterinary staff.

The surgeon noted that the deviations from the approved closure methods stemmed from their experience and training at previous institutions, where they performed surgery on multiple wild small mammal species, but they did recognize their failure to ensure their activities were compliant with their UW IACUC protocol.

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The surgeon self-reported this event to OAW, and indicated that in order to prevent a similar event from occurring in the future they will conduct more regular reviews of the IACUC protocol, improve their communication between research team members and veterinary staff, and will immediately consult veterinary staff for guidance if they have concerns about the wound closure. They will follow the closure methods as approved in the protocol unless an amendment to the protocol is approved to modify those methods.

This has been reported to OLAW.

Discussion:

- A member asked what would have happened if the PI had contacted veterinary services rather than performing the repair – DCM veterinarians would have assessed the wound and potentially repaired it as a clinical procedure.
- The IACUC discussed training and post-approval monitoring, and potential ways to increase compliance. Suggestions included additional training around how to review the IACUC protocol and consequence for deviation, or a place for signature on the required surgery or monitoring logs indicating that procedures were performed in alignment with the approved protocol.
- A Member suggested additional reminders, such as a Navigator article or during surgery training, that individuals coming from other institutions need to make sure they are following their UW protocol.
- The IACUC discussed writing protocols with flexibility (e.g., general suture type rather than specific suture material).

Motion was made and seconded: to send a Letter of Counsel

Further Discussion: *include:*

- *review of protocol*
- *change of protocol language to be less specific*
- *suggestion to add statement to monitoring documents*

Vote: Approved with 13 members voting in favor, 0 against, 0 abstentions.

4243-01 On April 4th, 2023, an experiment was initiated in which 16 rabbits received an intradermal injection of an infectious agent, followed by serial blood collection and tissue aspiration or skin biopsy to track progression of infection, concluding with humane euthanasia on May 23rd. Half of the rabbits received immunosuppression by IM injections of depomedrol. All of these procedures and the general experimental timeline are approved on the associated IACUC protocol, however the procedures are not approved in this combination. For example, animals are approved to receive intradermal injections followed by blood and tissue sampling as it was performed, but those animals are not approved to receive immunosuppression. Other experiments are approved for administration of immunosuppression as it was performed, but not approved for skin biopsy.

Upon being alerted to the noncompliance, the PI accepted full responsibility for the oversight and was forthcoming with all requested information. This is a small lab, and the PI expressed some recent challenges they have faced with staffing that may have contributed to this event, but they also made it clear that it was not intended as an excuse. As corrective action they will review their IACUC protocol prior to initiating any future studies. They have also submitted an amendment and will work with their OAW liaison to ensure all necessary revisions are incorporated. Their OAW liaison will also meet with a member who has recently joined the lab, and who will be performing the animal work, to ensure that they are familiar with the regulatory requirements and know how to access and review the protocol.

This has been reported to OLAW.

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QUESTIONS/COMMENTS:

- *A member asked how this was discovered -- a member of veterinary services discovered the noncompliance during clinical workup of a case on the same protocol but unrelated to the noncompliance.*
- *The IACUC discussed if there are any actions that the committee would ask the group to take that they have not already initiated. The IACUC discussed which category of communication would be most appropriate, with suggestion for a letter of counsel to convey the importance of understanding what is approved on the protocol. A member suggested sending commendation to the staff member who found this non-compliance*

Motion was made and seconded: to send a Letter of Commendation for Vet Staff; to send a Letter of Counsel to lab

Further Discussion: include:

- *provide assurance that all have read the protocol*
- *Contingency plan in place for staff turnover*

Vote: Approved with 13 members voting in favor, 0 against, 0 abstentions.

4154-01 Between November 2021 and May 2023, seven cohorts of mice enrolled in a study to evaluate the experimental agent senicapoc in a model of stroke received a higher than approved volume of drug and vehicle, miglyol. The protocol is approved to administer 5 uL/g. Animals received 8 uL/g of these agents. A total of 96 animals received the higher than approved volume. This discrepancy was identified while working with Vet Services to investigate a recent unexpected increase in mortality in animals enrolled in this study. Pathology suggests that the increased mortality can be attributed, at least in part, to the vehicle. It is not known if the increased volume played a role. The research scientist adjusted the volume administered to animals based on the final stock concentration of the experimental agent. Upon being alerted to this noncompliance, the group submitted an amendment to include a range for the volume administered, and continues to work closely with Vet Services to refine their plans for this study, including use of a different vehicle moving forward. This event has been reported to OLAW.

QUESTIONS/COMMENTS:

- *The IACUC discussed the route of administration, and that the role of the vehicle in the recent mortality is unclear.*
- *Members suggested that we should educate groups in writing protocols to provide reasonable flexibility, for example a range of volume.*
- *The IACUC discussed which category of letter would be most appropriate.*
- *A member suggested acknowledging in the letter that the lab has been very cooperative and invested in investigating the problem and finding a solution.*
- *A member suggested also sending a kudos to veterinary staff.*
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Motion was made and seconded: to send a Letter of Commendation to Vet Staff and a Letter of Counsel to lab

Further Discussion: assurance that members are reading protocol, ensure that flexibility in experiments included in protocol, letter should include commendation for lab's response .

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Vote: Approved with 13 members voting in favor, 0 against, 0 abstentions.

Standard Operation Procedures / Policies / Guidelines

- Standard procedures for insulin tolerance tests in mice, analgesia, euthanasia, and glucose and insulin tolerance tests in rats, and radiography in non-human primates – **AS**
 - *A Member asked how protocols are updated. If there are changes, the updated procedures need to be added manually; If changes aren't urgent will update at Triennial or next amendment.*

Motion was made and seconded: to approve the Standard Procedures as written.

Further Discussion: none

Vote: Approved with 13 members voting in favor, 0 against, 0 abstentions.

- Housing and Care of Vertebrate Animals and Cephalopods – **CC**
 - *Expanded to include more information and cephalopods; added sections on lighting and monitoring light levels; added section on temp and humidity monitoring; section on water quality monitoring*

Motion was made and seconded: to approve the policy as written.

Further Discussion: none

Vote: Approved with 13 members voting in favor, 0 against, 0 abstentions.

- Food and Fluid Restriction in Non-Rodent USDA Species– **CC**
 - *This policy is beyond the standard three year review date for the IACUC, but additional modifications are needed, so not ready for IACUC review at this time. CC is leading a working group to review and update the policy, taking into consideration recently updated APV guidance.*

IACUC Training (SOPs) – CC

- Environmental Enrichment for Zebrafish (*Danio rerio*) and Medaka (*Oryzias latipes*)
- Environmental Enrichment for Cephalopods
 - *Summaries of the Environmental Enrichment SOPs were presented for Zebrafish & Medaka and for cephalopods*

Semi-Annual Report – BE

For the program review, the IACUC was split into groups and each group evaluated different aspects of the program as categorized in a modified OLAW program review checklist. Each group provided a summary of

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their discussions and provided their feedback and suggestions for improvement. These will be incorporated into the draft semi-annual report to be reviewed at the July meeting.

BE presented a diagram of site visit findings by type over the past 6 month period.

IACUC Training (Semi-Annual Program Review) – JFI

JFI provided refresher training on regulatory requirements related to the semi-annual program review, required components of the semi-annual report to be submitted to the IO, and the process that is followed by the UW IACUC.

Closing Business:

The Meeting was brought to a close at 4:09 pm.