

Memorandum to: Sally Thompson-Iritani
From: Institutional Animal Care and Use Committee
Subject: Semiannual Report of the Program Review and Facility Inspection
Date: August 11, 2023

This report summarizes results of the IACUC’s 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.](#)):

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

All animal care and use at the University of Washington adheres to PHS Policy, the Guide, and the AWA, as described in our Assurance. Within that framework, the IACUC has approved the following departures from PHS Policy, the AWA and the Guide:

- 105 protocols with prolonged restraint (bats, birds, fish, mice, non-human primates, pigs)
- 11 protocols with housing at non-standard temperatures (6 mice, 1 rats, 3 zebrafish)

The following IACUC approved general departures remain in place

- **1 general cage height variance for infant non-human primates**
- **1 general cage floor-area variance, with added vertical space, for juvenile non-human primates**
- **1 general exception for placing NHP feed on compound floors**
- **1 general L-shaped housing variance for NHPs to provide flexibility in configurations of combined cages**
- **1 general cage change frequency variance for singly housed gerbils**
- **1 general exception for changing cage components in the Gnotobiotic Animal Core (GNAC) facility as needed.**

Details are included in [Appendix C](#).

While not departures, the IACUC has also approved the following exceptions to its policies that implement PHS Policy, the AWA and the Guide:

- 11 protocols with cage size variances (9 for mice, 2 rats)
- 10 protocols with wire bottom cages (6 mice, 2 rats, 2 mice and rats)
- 45 protocols with weaning variances (44 mice, 1 rats)
- 3 protocols with a non-AVMA endorsed euthanasia method (2 frogs, 1 birds)
- 57 protocols with multiple major surgeries (20 non-human primates, 12 rats, 9 rats and mice, 9 mice, 3 pigs, 1 birds, 1 fish, 1 frogs, 1 rabbits)
- 11 protocols with other policy variances (9 mice, 1 rats, and 1 mice and rats)

Details of these can be reviewed via reports in HoverBoard.

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

Animal Care and Use Program Review Date(s): January through June 2023

- A. There were no deficiencies in the program during this reporting period.
 B. The following deficiencies have been identified:

Over the past six months, 12 adverse events or non-compliances were reported to the IACUC and, as required, to OLAW, AAALAC, or USDA. See [Appendix A](#) for details.

Teams of IACUC members recently reviewed all elements of the University's animal care and use program, guided by the OLAW-provided checklist. They found the program to be strong. Specific comments and suggestions for improvement are detailed in [Appendix D](#). The IACUC and OAW will pursue the suggestions in the coming year.

III. Deficiencies in the Institution’s Animal Facility

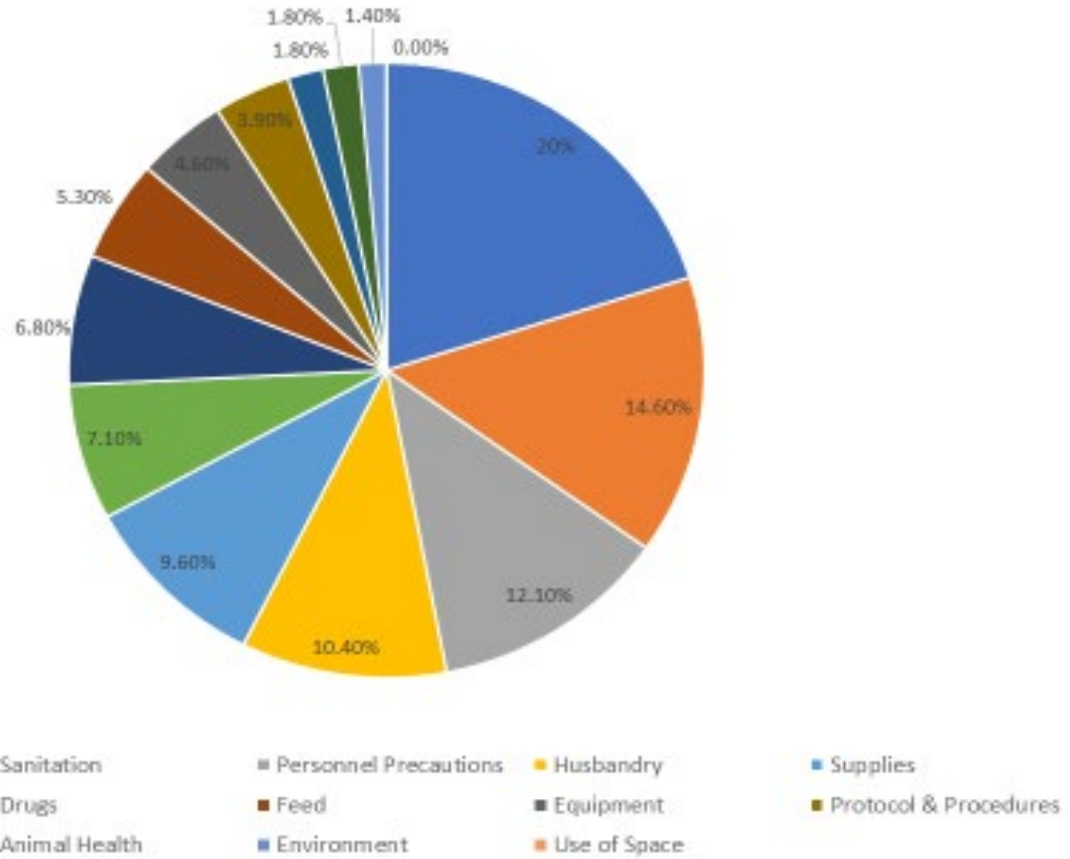
Animal Facility Inspection Date(s): January through June 2023

- A. There were no deficiencies in the animal facility during this reporting period.
 B. The following deficiencies have been identified

Over the past six months 269 deficiencies were identified during IACUC facility inspections or self-reported. None were considered significant. Counts by type are shown below.

Type	Minor	Significant	Type	Minor	Significant
Facility and Furnishings	56	0	Personnel Precautions	34	0
Sanitation	41	0	Feed	15	0
Husbandry	24	0	Use of Space	1	0

Equipment	13	0	Signage and Information	20	0
Drugs	18	0	Research Chemicals	5	0
Supplies	27	0	Protocol/Procedures	6	0
Environment	4	0	Animal Health	5	0



See [Appendix B](#) for deficiency details.

IV. Minority Views

Select A or B:

A. No minority views were submitted or expressed.

B. The following minority views were expressed:

V. Status of AAALAC Accreditation

Reference Assurance: #000523

Most Recent AAALAC Site Visit: 06/22/2023 through 06/30/2023

Most Recent Full Accreditation issued: 11/01/2019

AAALAC Council will meet in September to determine final accreditation status

VI. Signatures (via signed and dated note of concurrence – see attached images)

IACUC Members	concurrence	date
A.B.	Concur	8/2/23
A.P.	Concur	8/9/23
A.W.	Concur	8/1/23
Christina Cruzen	Concur	7/27/23
D.M.	Concur	8/9/23
D.T	Concur	8/2/23
E.S.	Concur	7/27/23
G.L.	Concur	8/2/23
G.S.	No Response	
J.F.I.	Concur	7/31/23

J.P.V.H.	Concur	7/31/23
Jane Sullivan	Concur	7/27/23
K.G.	Concur	7/29/23
M.B.	Concur	8/2/23
M.K.	Concur	8/2/23
M.R.B.	Concur	7/31/23
M.R.K.	Concur	8/7/23
M.S.	Concur	8/2/23
S.P.	Concur	7/31/23

Appendix A: Deficiencies in the Institution’s Animal Care and Use Program

Severity	Repeat?	Location	Deficiency and Corrective Action Plan	State	Date Complete
Significant	No	ARCF	<p>Mouse mortality due to no food: On December 2nd, 6 mouse cages were found without any food present. The cages had been transferred between two labs on November 29th as part of a larger group of cages and were documented to have received food on the day of transfer. At the time of discovery, 3 mice were found deceased and several others were noted to be lethargic and dehydrated. All ill mice were treated by veterinary staff and made a full recovery.</p> <p>The husbandry staff confirmed doing daily health checks, but no one noted the absence of food. The research staff member that placed the cages stated they were confident that food had been placed in the cages upon transfer. The process for daily health checks was discussed with the husbandry supervisor and the documentation of health checks was reviewed for this room. No discrepancies were found in the process or documentation. Additional details about this particular incident cannot be obtained as the animal technician responsible for performing the daily health checks is no longer employed at the University of Washington.</p> <p>Corrective Actions: As a precaution, the training team retrained the lab staff to ensure that food is offered in adequate amounts. The process for daily health checks was also reviewed and discussed with the husbandry supervisor.</p>	Complete	2/3/23
Significant	No	ARCF	<p>Tumor bearing mice not monitored or euthanized according to protocol: This protocol uses mice to evaluate the effects of therapeutic nanoparticles on tumor size reduction. Two studies involving a total of 40 nude mice were initiated by a research scientist in October 2022, and reached their planned experimental endpoints on December 6, 2022 and December 23, 2022. However, the mice were not euthanized as planned at the endpoints. This in itself was not non-compliant with the protocol since the protocol allows for longer survival times. However, there was no documentation of monitoring after these dates. Additionally, the research scientist failed to perform body condition scoring (BCS) as described in the protocol for the duration of these studies.</p> <p>Three mice were found dead by husbandry staff on January 1, 2023. This was reported to the group. All remaining animals were reported to vet services on</p>	Complete	5/3/23

January 4th for evaluation due to observation of large tumors. On examination, there were 33 mice remaining in 9 cages, 4 mice had tumor ulcerations, 1 mouse had a BCS <2, and at least 4 mice had tumor size exceeding 10% of body weight. These are all humane endpoint criteria per IACUC Policy and this IACUC protocol. The group was contacted, and all remaining mice were euthanized the same day.

Upon being alerted to the non-compliance, the PI immediately began an investigation of the incident and self-reported the incident to the Office of Animal Welfare, including a thorough summary of the event, copies of monitoring records, and a description of self-initiated corrective actions, which include the following:

The PI has reviewed the protocol with all personnel involved in animal work.

All personnel have reviewed the associated IACUC policy on tumor monitoring and endpoint criteria, and the body condition scoring procedure.

All studies will now be supervised by a senior member of the group.

All personnel have been instructed to consult with vet staff if there are any questions about endpoint criteria or observed clinical signs.

The group has instituted a standardized excel sheet for monitoring that will automatically identify tumor size as % of body mass, and include sections for BCS, observations, and scheduled euthanasia date.

The group has provided an updated contact list and contact tree in housing rooms for vet staff.

The individual that performed the animal work for these studies is no longer on the protocol.

Significant	No	SLU 3.1	Unapproved dose of insulin administered to mice: On 12/29/2022, ten adult male mice were fasted for 5 hours per the approved protocol, then given regular insulin for an insulin tolerance test (ITT). A miscalculation in the dilution of the insulin resulted in a higher than expected dose of insulin administered to the mice. Per the approved protocol, dextrose was administered by the group at 30 – 60 minutes post-insulin dose to correct low blood glucose, and Vet	Complete	5/3/23
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Services was contacted. One mouse presented moribund and was humanely euthanized by Vet Services. The remaining nine mice presented lethargic and blood glucose measurements continued to remain low after two subsequent boluses of dextrose were administered under vet service guidance. The remaining nine mice were euthanized.

The lab uses a detailed spreadsheet to calculate the dose of insulin for ITT. The lab member used the spreadsheet when calculating doses for this experiment, so it is unclear where the miscalculation occurred. The lab estimates that the animal received ~10x the normal dose of insulin, exceeding the dose range approved on the protocol. The lab member was retrained on the insulin dosing procedure. They have since performed two ITT procedures (one under supervision, another independently) without issue.

Significant	No	HSB	Cerebral Injury During Placement of Recording Complete	6/12/23
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Device: On January 6th, one macaque sustained an injury to the cerebral tissue during placement of a recording device by a trainee. The device was being positioned atop a surgically-placed cylinder affixed to the skull of the animal, around a craniotomy site. The device contains a guide cannula which is intended to be lowered into the brain after the device is seated properly over the chamber. This guide cannula serves as a channel for a recording wire to reach a specific location within the brain. In this incident, the guide cannula was extended too far and caused trauma to the underlying tissue as the device was placed.

The animal was observed exhibiting noticeable neurologic impairment within minutes, at which point the procedure was terminated, veterinary staff were immediately contacted, and treatment was initiated.

An MRI confirmed a defect in the cerebral tissue where the original injury occurred with some fluid accumulating in the adjacent area. The animal was treated with a combination of systemic and local treatments (steroids, antibiotics, and debridement as needed). Collection of neural recordings from this animal has been suspended while the animal recovers and will only proceed upon receipt of veterinary approval. At this time, the animal is generally stable and continues to be closely monitored and treated by veterinary personnel.

The trainee placing the device was relatively new to the lab and in the process of being trained. As part of

the training process, the PI was supervising the trainee as they performed the procedure. The PI briefly stepped away from supervising the trainee to take an emergency phone call when the incident occurred. The PI acknowledges the seriousness of this mistake and takes full responsibility for this incident. The following corrective actions have been implemented:

- The training process for new personnel was clarified and will now be documented on a form that is signed by the trainer and trainee and placed in a binder that will be made available to the IACUC upon request.
- The safe length for guide tube protrusion is the distance from the top of the recording chamber to the surface of the underlying tissue. For experiments requiring a tissue-penetrating guide cannula, this distance can and will be measured. The cannula will be retracted above this point prior to positioning of the recording device atop the chamber.
- A written checklist has been affixed to the experimental set-up to remind the experimenter, among other things, that the guide tube must be withdrawn before the microdrive is placed atop the recording chamber. The circumstances surrounding the event were discussed at a meeting of all laboratory TYPE YOUR DEPARTMENT NAME HERE personnel, making it unlikely that any personnel will repeat this error. The checklist will be reviewed with new members who join the lab as part of their onboarding.

Significant	No	HSB	Two mice were found dead by husbandry staff on 1/7/23. These two mice, along with 14 other mice in the colony, were advanced in age (2.5-3yrs old; DOB 1/2020 - 7/2020). All mice were colony animals and had not undergone any experimental procedures. The related IACUC protocol specified that, for general colony maintenance, mice were to be monitored once a week by research staff, and mice older than 8 months of age would be euthanized. The research team did not monitor nor euthanize the mice as described in the protocol. The mice were monitored daily by husbandry staff. The PI opted to donate the 14 remaining mice to another lab on campus that studies aging, and all mice were euthanized on 1/20/23.	In Process
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Significant	No	ABC	<p>Use of expired analgesic: On 2/21/23, two non-human primates received Buprenorphine-SR that was past its discard date. This is an injectable drug that comes in a multi-dose vial. According to the manufacturer, the bottle is stable for 28 days after first puncture, and should then be discarded. In this instance, although the bottle had not yet reached its expiration date, the bottle was 40 days after first puncture. The error was due to the bottle not being appropriately labeled by the veterinary technician at the time of first puncture on 1/11/23, such that it was not obvious to the veterinarian retrieving the drugs later that the bottle had already been punctured. The error was discovered during an internal records review of the controlled substance log, and was immediately self-reported upon discovery.</p> <p>All personnel in the facility that interact with controlled drugs have been re-trained on appropriate labeling of puncture date.</p> <p>The two animals that received this drug were also receiving an NSAID to provide multimodal analgesia. The animals were monitored daily, and there were no observed signs of pain or distress, and no signs of a reaction or infection at the injection site.</p>	Complete 6/28/23
Significant	No	ARCF	<p>On 2/20/23, two pups of around 2 weeks of age (exact birthdate unknown) were found dead. One adult male mouse was also found in the cage and was healthy. The room technician who found the pups reported that she removed a dead mouse from the same cage on 2/15/23. The technician checked the sex of the carcass and thought it was male, but this was not confirmed. The technician did not confirm that there was a lactating female remaining in the cage with the pups.</p> <p>The technician in charge of this room was re-trained on 2/22/23 on sexing mice, as well as on the guidelines for identifying and reporting orphaned pups.</p>	6/12/23
Significant	No	HSB	<p>Survival surgery not performed according to protocol; analgesia not provided: During a site visit on 4/18/23, the IACUC site visitors discussed surgical practices with a lab member that had been performing cranial surgeries in mice (specifically cannula placement in the cerebral cortex). During that discussion, it became apparent that the surgeon was not performing the procedure as outlined in the protocol – including instrument sterilization, proper shaving and skin preparation, administration of local</p>	In Process

anesthetic, and provision of post-operative analgesia. The PI was contacted and voluntarily suspended any further surgeries until the situation could be fully evaluated. Upon investigation, it was confirmed that this individual had been initially trained internationally and had performed this same surgery for a number of years before coming to the UW. The individual participated in the required UW classes for animal handling, surgery 1, and surgery 2. Unfortunately, they did not complete the required surgery certification step prior to performing independent surgery. It was determined that a total of 30 surgeries had been performed by this individual since early 2022. It was also noted that record-keeping was sparse so it was difficult to confirm treatments provided and to verify proper post-operative monitoring.

Surgeries have been temporarily suspended. The surgeon is retaking all surgery training courses and will obtain certification before performing independent surgery. The lab has worked with OAW to create analgesic and post-operative monitoring documentation to ensure adequate recordkeeping. The PI has created a surgery check-list to be used by the surgeon and reviewed by the PI for every surgery.

Significant	No	HSB	<p>Administration of unapproved drug: In January 2023, 8 mice were enrolled in an experiment to determine if certain kappa opioid receptor (KOR) antagonists are long lasting, which is key to understanding the clinical utility of these antagonists (like naltrexone) in the treatment of substance use disorders. For mice enrolled in the experiment, a baseline level of analgesia response was established using the warm water tail immersion test paired with administration of the KOR agonist U50,488. Following this, all mice received daily IP injections of nalfurafine for 7 days. At the end of this period, the level of analgesia responses was re-evaluated as described above, and then mice were euthanized. Though the general sequence of events in this study were approved on the protocol, the specific drug being evaluated (nalfurafine) was not approved for use on this study.</p> <p>In April 2023, when the group became aware of this oversight, they immediately submitted an amendment to add this group to the study. The group has also refined their experiment preparation process to include a second check of the protocol by the lab manager. When getting ready to start an experiment, the individual conducting the experiment will now notify the lab manager,</p>	In Process
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identifying specifically where in the protocol their experiment is described, and the lab manager will confirm that the study is described in the protocol. Additionally, during amendment writing, all investigators will now be asked to review the experiments they intend to perform to ensure that the full scope of the study is captured within the amendment.

Significant

No

LSB

Unapproved repair surgery and surgical closure: 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.

In Process

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 were 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.

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.

Significant	No	HR&T	<p>Unapproved procedure: 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.</p> <p>Upon being alerted to the noncompliance, the PI accepted full responsibility for the oversight and was forthcoming will 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.</p>	In Process
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Significant	No	HSB	<p>Administration of unapproved volume: 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.</p>	In Process
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Appendix B: Deficiencies in the Institution's Animal Facility

Severity	Repeat?	Location	Room	Deficiency and Corrective Action Plan	Date Identified	Correction Due Date	Date Complete
Minor	no	HSB	I105M	Virkon diluted solution last made on 10/17/22. Only good for a week. Cleaning chemical (including surface disinfectants) is expired and must be disposed of.	1/4/2023	3/1/2023	1/27/2023
Minor	no	HSB	K007F	Eye wash out of date. Log weekly	1/4/2023	3/1/2023	1/4/2023
Minor	no	ROOS	254	Expired Clidox. Dispose.	1/4/2023	2/6/2023	1/9/2023
Minor	no	ROOS	264	Over-counter light fixture is broken and needs to be repaired.	1/4/2023	2/6/2023	1/6/2023
Minor	no	HSB	K018B	K018B - Expired sugar pellets in room. Should be labeled to not use. Also open beaker of some form of solvent potentially being used to sterilize probes/connectors left on trolley.	1/4/2023	3/1/2023	2/3/2023
Minor	no	HSB	I015M	Vetericyn expired 7/21. Dispose.	1/4/2023	3/1/2023	1/27/2023
Minor	no	HSB	K017D	Povidone/Iodine sticks expired 12/20; Puralube expired 10/20. Dispose	1/4/2023	3/1/2023	2/27/2023
Minor	no	HSB	I015M	Virkon tablets expired. Dispose.	1/4/2023	2/1/2023	1/27/2023
Minor	no	HSB	K007D	K007D - Could not tell if Iso machine certified. Also vials of undated substances in room. One labeled PBS the other DIH2O. Certify Iso machine and label substances	1/4/2023	3/1/2023	2/3/2023
Minor	no	HSB	I015M	animals on restricted water. Several cages currently in experiment – HB2, HB3, HB5, HB6, NR24-26, and JR5, 14, 15, and 19. However, on the SSR sheet, the last entry seen for	1/4/2023	3/1/2023	1/27/2023

				animals being provided water was on 12/5. Update logs regularly.			
Minor	no	ROOS	264	Isoflurane vaporizer machine is overdue for annual recalibration. Vaporizer must be recalibrated before it can be used again on animals. A prominent, firmly-affixed sign should be posted as soon as possible stating "DO NOT USE THIS ISOFLURANE MACHINE UNTIL IT HAS BEEN RECALIBRATED".	1/4/2023	2/6/2023	1/5/2023
Minor	no	FOEGE	N039B	Eye wash last test date was 12/19/22. Test and log eyewash.	1/11/2023	2/13/2023	1/23/2023
Minor	no	FOEGE	N039A	Spray bottle of 70% ethanol with no date in Cookson lab. Label with date.	1/11/2023	2/13/2023	1/17/2023
Minor	no	FOEGE	N039B	Rack with storage in back of room not cleaned since 4/22. Must be cleaned	1/11/2023	2/13/2023	1/30/2023
Minor	no	FOEGE	N039A	Expired needles. Discard.	1/11/2023	2/13/2023	2/13/2023
Minor	no	FOEGE	N039B	Lieber cages protocol 310801 labelled with biohazard cage card but no agent listed. Properly label cages (list agent if biohazard or remove biohazard cage card if not necessary)	1/11/2023	2/13/2023	1/13/2023
Minor	no	FOEGE	N039B	Autoclaved packets lack date of sterilization, Cookson lab. Discard.	1/11/2023	2/13/2023	1/17/2023
Minor	no	FOEGE	N039B	BSC #2 not up to date on annual inspection. Update BSC #2 to have it in compliance on annual inspection	1/11/2023	4/10/2023	3/24/2023
Minor	no	FOEGE	N040	Spray bottle of Clidox was mixed on 12/9/22 - out of date. Discard.	1/11/2023	2/13/2023	1/16/2023
Minor	no	FOEGE	N039B	Eye wash checks overdue.	1/11/2023	2/13/2023	1/23/2023

				Complete and log eyewash checks			
Minor	no	FOEGE	N039A	Unlabeled/date sterile packs. Label and or date the unlabeled/date sterile packs.	1/11/2023	2/13/2023	1/17/2023
Minor	no	FOEGE	N039A	Eye wash station no test dates logged since 12/12/22	1/11/2023	3/15/2023	2/1/2023
Minor	no	Brotman	141	Expired subdermal electrodes. Discard.	1/13/2023		1/13/2023
Minor	no	HRT	B106A	B016A: there is peeling wall paint in one location. Repair.	1/17/2023	4/1/2023	4/3/2023
Minor	no	HRT	SB11	Expired refresh plus lubricant eye drops (2018), expired Qtips (2017). Discard	1/17/2023	2/18/2023	2/6/2023
Minor	no	HRT	JANITOR'S CLOSET	Expired Purell handfoam (2016/2020). Discard.	1/17/2023	2/19/2023	2/16/2023
Minor	no	HRT	SB11	Expired eye ointment. Discard.	1/17/2023	2/18/2023	1/18/2023
Minor	no	HRT	DIRTY CAGE WASH	Appears to be a chronic water leak at the Garb-el dumping station; there are floor stains. Repair Leak.	1/17/2023		3/2/2023
Minor	no	HRT	DIRTY CAGE WASH	Floor chips (non-sanitizable) at the periphery of the drain by the rack washer. Repair	1/17/2023	5/1/2023	4/18/2023
Minor	no	HRT	SB11	Expired eye ointment. Discard.	1/17/2023	2/18/2023	1/18/2023
Minor	no	HRT	JANITOR'S CLOSET	Chlorine concentration testing not being performed for the Clidox mixing station. Perform testing.	1/17/2023	2/19/2023	2/14/2023
Minor	no	HRT	SB056	Isoflurane vaporizer appears to be out of date for service (4/20) Service equipment.	1/17/2023	3/31/2023	4/1/2023
Minor	no	HRT	SB11	15 ml conical tube filled with "Filter Saline" and dated with 10/18/year illegible. If this is injected into animals please consider using a sterile empty multidose vial and make sure a use by/expiration date is legibly printed on the container. If not used in animals write that on the	1/17/2023	2/18/2023	1/18/2023

				container.			
Minor	no	HRT	SB11	expired suture 12/2018 - discard	1/17/2023	2/18/2023	1/18/2023
Minor	no	HRT	SB11	expired refresh plus lubricant eye drops (2018), expired Qtips (2017) - discard	1/17/2023	2/18/2023	1/18/2023
Minor	no	HRT	SB056	Soap dispenser is laying on the counter top. Have the soap dispenser mounted on the wall.	1/17/2023	3/1/2023	2/9/2023
Minor	no	HRT	JANITOR'S CLOSET	PPE was not present for handling the Clidox disinfectant chemicals (e.g. face shield, gown. Provide PPE.	1/17/2023	3/1/2023	2/3/2023
Minor	no	HRT	SB11	expired suture 12/2018 - discard	1/17/2023	2/18/2023	1/18/2023
Minor	no	HSB	C615	In the hood there is a chamber to place the animals where they receive isoflurane. This container needs to be cleaned better.	1/25/2023	3/1/2023	2/22/2023
Minor	no	HSB	C609	None of the several people listed as emergency contacts on the cage cards are listed on the sheet in the room that has phone numbers for these lab personnel. Please update this sheet.	1/25/2023	3/1/2023	2/1/2023
Minor	no	HSB	G614	Expired Clidox - discard	1/25/2023	3/1/2023	2/1/2023
Minor	no	HSB	C609	There isn't any indication of singly housed mice in the room, such as a SSR sheet or notice posted, although pretty much every cage contained singly housed mice. Create and post signage.	1/25/2023	3/1/2023	2/13/2023
Minor	no	HSB	C618	Tape in the room has come loose, exposing a sticky surface. Replace where required with fresh sanitizable plasticized lab tape (e.g.	1/25/2023	3/1/2023	1/27/2023

				Timed brand).			
Minor	no	HSB	C613	Cubicle 1: has 2 cages that say "Not in Use" but there is not date as to when they were autoclaved. Provide date.	1/25/2023	4/1/2023	2/1/2023
Minor	no	HSB	C609	There isn't any indication of singly housed mice in the room, such as a SSR sheet or notice posted, although pretty much every cage contained singly housed mice. Create list or signage to indicate this.	1/25/2023	3/1/2023	2/13/2023
Minor	no	HSB	C609	There is a laptop on the floor (non-sanitizable)...please store this on a table.	1/25/2023	3/1/2023	2/21/2023
Minor	no	HSB	C613	In this room are a few low-to-the-ground carts made of a piece of wood particle board mounted on wheels. The wood is covered in an adhesive plastic sheet but the plastic cover is coming off on some of these, exposing the wood. These areas need to be covered in a material that can be easily cleaned and won't come off.	1/25/2023	4/1/2023	2/13/2023
Minor	no	HSB	D604	Tape in the room has come loose, exposing sticky surfaces. Remove any tape in the room that has come loose, exposing a sticky surface. Replace where required with fresh sanitizable plasticized lab tape (e.g. Timed brand).	1/25/2023	3/1/2023	1/20/2023
Minor	yes	HSB	G619	Red dots are missing from some water bottle cages. Please ensure that all techs working in this space understand about the red dots and make sure the red dots are applied to new cages that	1/25/2023	3/1/2023	2/1/2023

				are used in this space.			
Minor	no	HSB	T163N	HSB T163N (Ladiges): Please encase any bare paper signage on and near the fume hood in plastic sleeves or laminate.	1/25/2023	3/1/2023	2/13/2023
Minor	no	HSB	G619	6th Floor Vivarium G619 (Zweifel): Expired sucrose pellets in 50mL conical tube need to be discarded.	1/25/2023	3/1/2023	1/27/2023
Minor	no	HSB	D604	Need updated expiration dates for all sucrose pellets that are in use.	1/25/2023	3/1/2023	1/20/2023
Minor	no	HSB	C609	There is a paper towel taped to the mouse plus maze, probably to reduce the light entering the arm. Not sanitizable. Remove and replace with a more permanent solution that can be sanitized.	1/25/2023	3/1/2023	2/1/2023
Minor	yes	HSB	G617	Isoflurane machine last calibrated in 2020. "Do not use" sign had fallen off machine and was placed on cart shelf below the vaporizer itself where it could not be seen (i.e. useless). Secure the signage to the machine and be sure the vaporizer is not used until it is recalibrated. [REPEAT FROM July 2022]	1/25/2023	4/1/2023	3/7/2023
Minor	no	HSB	C613	Cubicle 2 and 3: There are paper towels on the table, not in the plastic container (mouse cage) where the towels are kept. There is also a cardboard box of syringes that need to be stored in a different container that can be closed and sanitized. Move towels to appropriate location. Move syringes to	1/25/2023	3/1/2023	2/27/2023

				closeable, sanitizable container.			
Minor	no	SLU	N117	Damaged chair back needs to be replaced	2/1/2023	4/1/2023	2/3/2023
Minor	no	SLU	N126	Replace any peeling adhesive labels and tape. Replace tape with sanitizable plasticized lab tape, such as TimeMed brand.	2/1/2023	3/1/2023	2/2/2023
Minor	no	SLU	N405	Rodent feces on floor and cart need to be cleaned up	2/1/2023	3/1/2023	2/2/2023
Minor	yes	SLU	N101	SLU N101 (Tian, but shared space): Cardboard boxes on the floor - they need to be raised above the floor if they need to remain in the room.	2/1/2023	3/1/2023	2/3/2023
Minor	yes	SLU	N131A	Cardboard boxes need to be raised above the floor	2/1/2023	3/1/2023	2/2/2023
Minor	no	SLU	N117	Fume hood is dusty, please wipe down inside and out to remove dust.	2/1/2023	3/1/2023	2/3/2023
Minor	no	SLU 3.1	E027	Expired Sodium Chloride (exp. 8/2021), Sterile Water (May 1 2018) and EtOH (exp. 1/10/23) (PI Thaler). Discard	2/2/2023	3/23/2023	2/27/2023
Minor	no	Brotman	P168	P 168 - Frevert Lab: language on SSR may not accurately reflect expectations of lab/husbandry based on conversations with lab manager. Update or confirm that language on SSR accurately reflects expectations of lab/husbandry	2/2/2023	3/5/2023	2/6/2023
Minor	no	Brotman	P167A	Stevens lab box has many expired items, labeling on nutrition supplement bottle is not legible. Discard expired items and label supplement bottle.	2/2/2023	3/6/2023	2/2/2023
Minor	no	Brotman	P166	P166: anesthesia machine is overdue for service. Requested the facility tag	2/2/2023	5/1/2023	2/8/2023

				machine not to be used. Service machine.			
Minor	no	Brotman	P169	Cages noted with extremely low food amounts, lab to feed – no documented checks since 1/26 whereas prior checks were q3days; no emergency contact info on cage cards – facility supervisor was asked to call lab and ensure lab staff would feed before end of day. Lab to increase feed amount and document more frequently; update cage cards with emergency contact info	2/2/2023	3/6/2023	2/3/2023
Minor	no	SLU3.1	E042	Expired Clidox (exp. 7/13 (DCM). Discard.	2/2/2023	3/23/2023	2/27/2023
Minor	no	Brotman	Vivarium - Multiple	Multiple information sections missing from nearly all cage cards. Fill out and update	2/2/2023	3/6/2023	2/8/2023
Minor	no	SLU 3.1	E020	Expired Artificial Tears (exp. 09/2020) and Lubri-Fresh PM Ointment (exp. 03/2019) - discard	2/2/2023	3/23/2023	2/24/2023
Minor	no	SLU 3.1	E027	DCM Food Storage Bin missing the "Date Open" and "Mill Date". Add information.	2/2/2023	3/23/2023	2/27/2023
Minor	no	SLU 3.1	E028	One (1) cage with urine collection apparatus inside had no cage card and no critical information present on study design to determine how long single mouse had been in urine collection device and without food or water. Add cage card.	2/2/2023	3/23/2023	2/27/2023
Minor	no	SLU 3.1	E044	Expired APOC4 drug + control (1 vial each) (exp. 1/23 in refrigerator (4C) in room. Discard.	2/2/2023	3/24/2023	2/27/2023
Minor	no	SLU 3.1	E027	Expired Sodium Chloride (exp. Sept 13 2019. Discard.	2/2/2023	3/23/2023	2/27/2023

Minor	no	Brotman	Vivarium - A38	Procedure rooms – lock box present; open and empty. Close and secure	2/2/2023	3/5/2023	2/2/2023
				Single cage set up for fecal collection w/mice sitting on the top shelf of the supply storage rack inside room (not in hood or cage rack) and not secure. The cage was extremely dirty and may have been sitting there since Monday. Animals were nearly out of food. Contacted VS to do vet check on health of animals. There was no critical information on study design present. The cage of animals did have a cage card fortunately. Animals removed and cage decommissioned.			
Minor	no	SLU 3.1	E029		2/2/2023	4/1/2023	2/2/2023
Minor	no	SLU 3.1	E045	Expired Rodent Chow 5053 (open date: 8/17/2022 and Mill Date: 5/13/2022). Discard.	2/2/2023	3/24/2023	2/27/2023
Minor	no	Brotman	P165	Expired supplies. Discard.	2/2/2023	3/5/2023	2/6/2023
Minor	no	SLU 3.1	E088C	E088C: Expired 5mg/ml Streptomycin in H2O (x2 1L bottles) (exp. 11/1/2022 and 1.5/2023). Discard.	2/2/2023	3/24/2023	2/27/2023
Minor	no	SLU 3.1	E043	E043: Mislabeled bottle --> says polyethylene but it is water. Correct labelling.	2/2/2023	3/23/2023	2/27/2023
Minor	no	Brotman	Vivarium - A43	No phone # available for emergency contact. Update information.	2/2/2023	3/5/2023	2/6/2023
Minor	no	Brotman	Vivarium - C34	Tamoxifen chow is not labeled with an expiration date. Label with date.	2/2/2023	3/5/2023	2/6/2023
Minor	no	Brotman	Vivarium - C34	Special diet expired on 1/21/23 - discard	2/2/2023	3/5/2023	2/2/2023
Minor	no	SLU 3.1	E044	Unlabeled Eppendorf tubes (x4) in test tube rack in	2/2/2023	3/24/2023	3/13/2023

				refrigerator (4C) – label appropriately.			
Minor	no	SLU 3.1	E028	Seven (7) cages with "Fasting" sign taped to the outside of cage had no cage cards and no critical information present re: study design to determine how long animals had been fasting with no food or water. No cage card on mouse cage setup for urine collection. Update cage cards and remove tape.	2/2/2023	3/23/2023	2/27/2023
Minor	no	Brotman	P152	cabinets and drawers are labelled with tape, some tape is starting to curl up on ends – recommend replacing with more durable labels rather than trying to keep with replacing tape as needed	2/2/2023	3/7/2023	2/17/2023
Minor	no	Brotman	Vivarium - A39	No phone # available for emergency contact. Provide info.	2/2/2023	3/5/2023	2/6/2023
Minor	no	Brotman	P152	Lots of paint cracks throughout room - Repair	2/2/2023	5/7/2023	2/15/2023
Minor	no	Brotman	Vivarium - Multiple	Multiple areas of cracked/peeling paint in room. A) outside door of P163A, wall by entry from prep room, on the pale green wall especially along baseboard, and by red emergency outlets by fluoroscope. Repair.	2/2/2023	5/7/2023	2/8/2023
Minor	no	SLU 3.1	E021B	E021B: Cabinet A, C and E. Cabinets were very dirty inside. Need to be cleaned now and regularly	2/2/2023	3/23/2023	3/28/2023
Minor	no	SLU 3.1	E087	E087A: Mislabeled EtOH in Water Container (exp. Sept 20, 2019). Properly label EtOH; ensure it is not expired.	2/2/2023	3/24/2023	3/13/2023
Minor	no	SLU 3.1	E088B	E088B: Expired PBS (exp. 30	2/2/2023	3/24/2023	2/27/2023

				Sept 2022). Discard.			
Minor	no	Brotman	P167A	167A Procedure Room - expired syringes found; carcass fridge is overfill with carcasses noted from at least one month ago. Properly dispose of syringes and empty carcass fridge	2/2/2023	3/6/2023	2/3/2023
Minor	no	Brotman	Vivarium - C37	There is a stainless steel cart hold behavioral equipment that is dusty/dirty. Place on a periodic cleaning schedule.	2/2/2023	3/5/2023	2/3/2023
Minor	no	SLU 3.1	E029	Expired Baytril x 3 vials (exp. June 2022). Discard	2/2/2023	3/23/2023	2/2/2023
Minor	no	Brotman	P152	Multiple expired items found in multiple cabinets – check all cabinets, drawers, and necropsy kits to ensure all supplies are in-date or are labelled as expired	2/2/2023	3/7/2023	2/7/2023
Minor	no	Brotman	Vivarium - B36	B36: rack washer – replace trapped/safety pull sign inside washer at the side facing clean cagewash. It is unreadable. There is only one de-energizing pull cable in this washer. A risk assessment should be performed to determine if another cable on the opposite side of the washer is feasible.	2/2/2023	4/5/2023	4/3/2023
Minor	no	SLU 3.1	E042	Eyewash station not being flushed weekly and there is no eyewash log present at all. Provide log and update regularly.	2/2/2023	3/23/2023	2/27/2023
Minor	no	SLU	S382	Need surgery records, even for simple procedures: date, anesthetic agent, analgesic, dose, and times. Maintain surgical records appropriately.	2/8/2023	4/1/2023	2/28/2023
Minor	no	SLU	S462	Bare paper on door and in	2/8/2023	4/1/2023	3/20/2023

				non-animal lab space. Laminate paper.			
Minor	no	SLU	S385	Chair has cracked foam. Discard or patch chair	2/8/2023	4/1/2023	2/28/2023
Minor	no	SLU	S374	Need door sign for when procedures in progress. Velcro present, but sign gone.	2/8/2023	3/27/2023	3/29/2023
Minor	no	SLU	S373	CO2 use instructions for rodent euthanasia is dated 9- 03. Use updated guidelines.	2/8/2023	3/27/2023	2/28/2023
Minor	no	SLU	S382	Protocol binders are present, but protocols out-of-date. Replace with current version.	2/8/2023	4/1/2023	2/28/2023
Minor	no	SLU	S373	1 worn chair w damaged foam. Replace or repair.	2/8/2023	4/1/2023	2/28/2023
Minor	no	SLU 3.1	E146	Some bare paper on the walls- need to be in plastic sleeves	2/15/2023	3/16/2023	2/16/2023
Minor	no	SLU 3.2	F715	Not all cage cards have appropriate information on them. Add emergency contact info on cage cards.	2/15/2023	3/16/2023	3/15/2023
Minor	no	SLU 3.2	F715	Proper PPE not accessible in the room. There was a designated spot for gowns and bonnets, but none present. Add proper PPE in accessible location.	2/15/2023	3/16/2023	2/27/2023
Minor	no	SLU 3.1	E146	Several chairs with rips and damage. Replace or repair.	2/15/2023	4/16/2023	2/16/2023
Minor	no	Manchester	Salmonid Feed Room	The existing wall mounted fire extinguisher bracket should be removed because the fire extinguisher is no longer housed in this room. Wall mounted signage has already been removed with the extinguisher	2/17/2023	3/20/2023	2/21/2023
Minor	no	HSB	T115	Box of expired food that should be disposed.	2/17/2023	3/31/2023	3/20/2023
Minor	no	HSB	T123	T123 had expired betadine solution (9/2022). Discard.	2/17/2023	3/21/2023	3/6/2023
Minor	no	SLU 3.2	F737	Expired controlled substance	2/21/2023	4/1/2023	3/30/2023

				Euthosol (exp. 8/2022). Discard.			
Minor	no	SLU 3.2	F737	Ketoprofen (working dilution). One vial not labeled properly (name, concentration, and expiry date (30 days from mix date) missing. Also, not using pharmaceutical grade. Replace with pharmaceutical grade and label properly	2/21/2023	5/1/2023	3/2/2023
Minor	no	SLU	S509	Minor wall damage near sink. Repair.	2/21/2023	4/28/2023	3/20/2023
Minor	no	SLU 3.2	F734	One (1) 50mL conical tube containing powdery substance not labeled. Label properly.	2/21/2023	4/1/2023	3/2/2023
Minor	no	SLU 3.2	F737	One (1) 15mL conical tube containing what appeared to be Betadine not labeled. Label properly.	2/21/2023	4/1/2023	3/2/2023
Minor	no	SLU 3.2	F737	Ketoprofen (stock vial Sigma). Not using pharmaceutical grade. Replace with pharmaceutical grade.	2/21/2023	4/28/2023	3/30/2023
Minor	no	Western Fisheries	D119B	Repair dings in ceiling, remove Velcro (facilities issue).	2/24/2023	4/28/2023	3/23/2023
Minor	no	Western Fisheries	W107	Bare paper posted on walls throughout needs to be encased in plastic sleeves or laminated.	2/24/2023	3/28/2023	3/27/2023
Minor	no	Northwest Fisheries	204A	The gas tank by the procedure space needs to have a 2nd chain installed so it is secure in case of a disaster (facilities issue). The brace is already present, just need some eye hooks and a chain.	2/24/2023	4/28/2023	3/13/2023
Minor	no	Northwest Fisheries	Wet Lab	Expired food found. Discard all expired food, especially the old food being stored in the nonworking freezer.	2/24/2023	3/28/2023	2/28/2023
Minor	no	Western	D119	Bare paper posted on walls in	2/24/2023	4/1/2023	3/23/2023

		Fisheries		spaces where animals are present needs to be encased in plastic sleeves or laminated			
Minor	no	Northwest Fisheries	204E	Unfinished wood cannot be sanitized and needs to be removed from procedure space	2/24/2023	3/28/2023	3/13/2023
Minor	no	Western Fisheries	D119B	No date on 50mL tube of MS222 solution. Label all tubes with appropriate, required information, including contents, date made up and expiration date. Discard expired items promptly.	2/24/2023	4/1/2023	3/23/2023
Minor	no	Northwest Fisheries	204E	Bare paper posted on walls throughout needs to be encased in plastic sleeves or laminated	2/24/2023	3/28/2023	3/6/2023
Minor	no	Northwest Fisheries	204E	The hole in the wall adjacent to the procedure space needs to be patched/filled (facilities issue).	2/24/2023	4/28/2023	3/13/2023
Minor	no	Western Fisheries	W110	Bare paper posted on walls throughout needs to be encased in plastic sleeves or laminated.	2/24/2023	3/28/2023	3/23/2023
Minor	no	Western Fisheries	W110	Unfinished wood cannot be sanitized and needs to be removed from this space.	2/24/2023	3/28/2023	3/23/2023
Minor	no	Northwest Fisheries	Wet Lab	NOAA Sockeye lab 'wet lab': Rodent traps are not being checked and logged daily. Rodent traps need to be checked daily and this activity must be logged.	2/24/2023	4/1/2023	3/16/2023
Minor	no	Western Fisheries	D119D	Repair crack in ceiling, remove tape	2/24/2023	4/28/2023	3/23/2023
Minor	no	Western Fisheries	D119	Eye wash in this space needs to be tested and logged weekly (currently being done monthly)	2/24/2023	4/1/2023	3/23/2023

Minor	no	SLU	E279	Damaged chair is unsanitizable, needs to be removed/replaced	2/28/2023	4/2/2023	2/28/2023
Minor	no	SLU	E210B	Old tape needs to be replaced with new sanitizable (plasticized) lab tape. -Bare paper posted on walls needs to be encased in plastic sleeves or laminated- Damaged chair is unsanitizable, needs to be removed/replaced	2/28/2023	4/2/2023	2/28/2023
Minor	no	SLU	S346	Expired supplies--including sutures, 'butterfly sets' and 1st Aid kit items--were mostly removed during visit. Research team needs to review all items in the room for possible additional expired items before AAALAC visit in June.	2/28/2023	4/2/2023	3/2/2023
Minor	no	SLU	E210B/E279	Expired Clidox - discard	2/28/2023	4/2/2023	2/28/2023
Minor	no	SLU	S346	Expired Heparin (2 bottles) needs to be clearly marked 'EXPIRED DO NOT USE IN LIVE ANIMALS'.	2/28/2023	4/2/2023	3/2/2023
Minor	no	HSB	I553	Expired eye rinse in Scrub Kit - discard	3/6/2023	4/10/2023	3/9/2023
Minor	no	HSB	I441	Expired items in 1st Aid Kit - discard	3/6/2023	4/10/2023	4/3/2023
Minor	no	HSB	I553	All bare paper signage and Post-It notes posted in this space need to be encased in plastic sleeves or laminated.	3/6/2023	4/10/2023	3/21/2023
Minor	no	HSB	I445A	Loose wires running from the recording booth door need to be tacked down.	3/6/2023	5/1/2023	4/25/2023
Minor	no	HSB	I553	Contact list includes outdated information and needs to be updated.	3/6/2023	4/10/2023	3/9/2023
Minor	no	HSB	I441	Fire extinguisher in room does not appear to have been	3/6/2023	5/1/2023	5/3/2023

				checked for several years. PI or proxy should contact Facilities to have the fire extinguisher checked and replaced if needed.			
Minor	no	HSB	I553	Any tape that is used on walls and other surfaces needs to be intact, and not crumbling or curling to expose a sticky surface. Damaged tape should be replaced with sanitizable, plasticized lab tape.	3/6/2023	4/10/2023	3/21/2023
Minor	no	HSB	I553	Two damaged chairs need to be removed from I553 space	3/6/2023	5/1/2023	5/3/2023
Minor	no	HSB	I441	Expired hydrogen peroxide wipes - discard	3/6/2023	4/10/2023	4/3/2023
Minor	no	HSB	I355	I-355. Flush eyewash station weekly; last flush recorded 2/20/2023.	3/7/2023	4/28/2023	3/21/2023
Minor	no	HSB	I361	I-361. No food label. The food container did not have any dates on it (i.e., no acquisition date / no discard/expiration date). Label appropriately	3/7/2023	4/28/2023	4/12/2023
Minor	no	HSB	I351	Place temperature/humidity probe in booth when animals are present to monitor temps during 3-5hr long sessions and record.	3/7/2023	4/28/2023	3/15/2023
Minor	no	HSB	I355	10% Bleach. SFI (use by date). Create log to help track when to make up new working 10% bleach solution. Be sure to have 'date made' and 'use by date' on bleach container.	3/7/2023	4/28/2023	3/8/2023
Minor	no	HSB	B108B	B108B-static rat cages. There is no hood in this room (or any room within the designated space). Allergen exposure concern. Acquire hood or use alternate method to control allergen exposure.	3/9/2023	5/1/2023	5/1/2023

Minor	no	HSB	C525	Floors are dirty – clean floors	3/9/2023	4/14/2023	3/14/2023
				I534Q: two (2) cages with a singly housed mouse in each cage were left unattended in the hood. Door to the procedure room was wide open. Recommend they shut the door and also get a window covering and have liaison educate the group			
Minor	no	HSB	I534Q		3/21/2023	5/5/2023	4/20/2023
				The lab bulk preps sucrose water and gives to animals as a reward. The bulk bottle was not labeled with a use by or expiration date. It was made up in early Feb 2023 and sitting ambient. Advised lab to label, put a use by date and store in fridge			
Minor	no	HSB	I355		3/21/2023	4/28/2023	4/21/2023
				No contingency plan posted or in place. Post contingency plan.			
Minor	no	HSB	I013/I032		3/21/2023	5/5/2023	3/23/2023
				Unlabeled solutions in behavior set-up – label solution.			
Minor	no	HSB	1534Q		3/21/2023	4/28/2023	4/21/2023
				Exposed and flaky tape all around lab – remove and replace			
Minor	no	HSB	I013/I021		3/21/2023	4/24/2023	4/18/2023
				Floor was dirty. Garbage, syringes on the floor. Clean space.			
Minor	no	HSB	I534Q		3/21/2023	4/28/2023	4/20/2023
				Air filters need to be changed- they are very dirty. No indication of when they were last changed.			
Minor	no	HSB	I013/I021		3/21/2023	5/5/2023	4/10/2023
				Cracked lower window pane on the west window in room #11-112 of Lab #11. Must be repaired BEFORE animals are next housed in the room, to ensure safety from outside weather and elements.			
Minor	No	FHL	111		3/22/2023	6/9/2023; extension request to 8/16/2023	

Minor	no	HSB	K084/K092	No contingency plan in place for zebrafish in either room. Provide plan.	3/28/2023	5/12/2023	4/19/2023
Minor	no	HSB	K092	Paper signage and post-it notes found. Paper must be placed in plastic sheets or laminated.	3/28/2023	5/12/2023	4/13/2023
Minor	no	HSB	K127	No contingency plan. Provide plan.	3/28/2023	5/5/2023	4/21/2023
Minor	no	HSB	K084/K092	K084 - Cloth chair at microscope or dissection bench, needs to be replaced with a chair that can be sanitized K092 - leather or pleather office chairs being used in this space, arms rests are starting to show wear. Recommend replacing these chairs with plastic chairs that can be sanitized.	3/28/2023	5/12/2023	4/13/2023
Minor	no	HSB	I728D	Contingency: No proper plan in place. Provide plan.	3/28/2023	5/5/2023	3/30/2023
Minor	no	HSB	I728D	1728D: Waste container filled with water. Unlabeled and quite full. Sitting on floor. Dump and label. Eyewash in prep room: two large jugs inside of the sink-making eyewash unusable. Remove jugs. Some expired materials: surgical gloves, scalpels. Put all expired items in a box and label as "Expired, Not For Use In Live Animals" or similar wording or discard.	3/28/2023	5/5/2023	4/17/2023
Minor	no	HSB	K127	Paper signage found on fume hood used for mouse perfusions and on dedicated wet bench space for perfusions. Paper must be placed in plastic sheets or laminated.	3/28/2023	4/28/2023	4/3/2023

Minor	no	HSB	J430/J430A	Floors were dirty. Mop and clean regularly	3/31/2023	5/3/2023	4/4/2022
Minor	no	HSB	I053/I073	One light out in each room, 1053 and 1073 - replace	3/31/2023	6/12/2023; extension 7/26/2023	
Minor	no	HSB	I089D	All paper signage posted needs to be encased in plastic sleeves or laminated.	3/31/2023	5/3/2023	4/14/2023
Minor	no	HSB	J1096G/J/M	Door frame into room damaged - repair	3/31/2023	6/12/2023	6/7/2023
Minor	no	HSB	I455A/I463A	I-463A/I-455A (Corridor): Wall needs repair around electrical panel	3/31/2023	6/12/2023	6/14/2023
Minor	no	HSB	J429	Secondary containers of media were not labeled with an expiration date. Formulations must be labeled with the following information: name of the compound, concentration, date of preparation and expiration date. Label appropriately.	3/31/2023	5/4/2023	4/4/2023
Minor	no	HSB	I737	This Daily Water Given Log was not posted on the door to I-737. The Lab needs to create and post this document and log the water given daily to any water-restricted animals.	3/31/2023	5/5/2023	4/4/2023
Minor	no	HSB	I733	One of three lights in the room is not working - replace	3/31/2023	5/10/2023	5/1/2023
Minor	no	HSB	I735	Expired TPA must be discarded.	3/31/2023	5/3/2023	3/31/2023
Minor	no	HSB	J430	Bare paper needs to be encased in plastic.	3/31/2023	5/5/2023	4/4/2023
Minor	no	HSB	I455	Cotton tipped applicators were wrapped up in discolored fabric and found in drawer; these were removed from the drawer and left out on bench during the site visit – discard.	3/31/2023	5/3/2023	5/2/2023

Minor	no	HSB	I729	Duct tape holding electrical cord in place needs to be removed and a non-tape solution found.	3/31/2023	5/3/2023	4/26/2023
Minor	no	HSB	J681H	Expired Clidox, needs to be discarded	4/3/2023	5/4/2023	4/4/2023
Minor	no	Guthrie Vivarium	Central Room	Bottle of Kennisol was leaking and had been placed in a plastic bag; some liquid had soaked a yellow gown placed under the bottle. Discard.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie	028D	Eyewash flushing log not up to date. Keep log up to date.	4/7/2023	5/15/2023	4/14/2023
Minor	no	Guthrie	368	No log on feed container to record container sanitation. Provide log.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie	369B	One cart excessively dirty (spilled bedding; aspen?), wrapper, plastic. Clean cart.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie	363	Paint stored on shelf next to animal food to be moved to another location	4/7/2023	5/12/2023	4/14/2023
Minor	no	Guthrie	369G	Food pellets with unlabeled expiration or use by dates in ziplocks. Must be labeled properly or disposed of.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie	363/363A	Room is cluttered and holes present in acoustical ceiling tiles. Declutter and repair ceiling.	4/7/2023	5/19/2023	4/14/2023
Minor	no	Guthrie	356	Cloth is loosely adhered over foam padding within chambers; not sealed and sanitizable. Remove/replace cloth.	4/7/2023	5/12/2023	4/12/2023
Minor	no	Guthrie	363	The floor was not sanitizable with all the cords/wires strewn across the floor. Clear up clutter.	4/7/2023	5/15/2023	4/14/2023
Minor	no	Guthrie	044D	Personnel stated that no PPE is required if handling animals or their soiled cage	4/7/2023	5/12/2023	4/18/2023

				components/waste. Provide appropriate PPE.			
Minor	no	Guthrie	044/056	Animal drinking water is gravity filtered through charcoal container. Container with charcoal appears greenish. Personnel not aware of any monitoring/testing of the water and states that they were told they had to make their animal drinking water this way, but couldn't remember by whom. Clean container and update/clarify process	4/7/2023	5/19/2023	4/12/2023
Minor	no	Guthrie	Roof	Some roll-up light shades reportedly haven't functioned/moved for a long period of time (months? >1 year?). Repair/replace asap.	4/7/2023	6/26/2023; extension to 9/15/2023	
Minor	no	Guthrie	368	Recorded temperatures on room log >70 every day. Reach out to Facilities to adjust temperature.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie Vivarium	Central Room	Change station in room has been nonoperational for months. Make change station operational.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie	421	Personnel not familiar with their lab/department's contingency plan (or if they had one). Update or draft contingency plan, post it, and ensure staff is familiar with it.	4/7/2023	5/19/2023	4/18/2023
Minor	no	Guthrie	363	Non-sealed wood shelves present. Seal shelves.	4/7/2023	5/12/2023	4/14/2023
Minor	no	Guthrie	369H	Rust on lower shelf of supply cart is markedly rusty. De-rust or replace.	4/7/2023	6/12/2023	6/13/2023
Minor	no	Guthrie	370/370A	Stored drugs include >75 small vials of morphine and one bottle of pentobarbital.	4/7/2023	5/19/2023	4/14/2023

				Appears that drug logs are inconsistent with the number of morphine vials present. Update inventory and drug logs and account for discrepancy.			
Minor	no	Guthrie	421	Broken light casing on ceiling and LED bulb present in chamber without cover over bulb. Repair.	4/7/2023	5/19/2023	4/12/2023
Minor	no	Chem Library	066	No contingency plan in place. Create and post contingency plan.	4/12/2023	5/26/2023	5/3/2023
Minor	no	HSB	E064A/E064B	Several unlabeled solutions. Discard. Label correctly in the future.	4/12/2023	5/25/2023	5/6/2022
Minor	no	Chem Library	066	Several undergrads and other lab members that don't handle animals --but would be exposed to animals when they are in the lab (open lab space) should submit for AUMS clearance. Have all lab members enroll in AUMS.	4/12/2023	5/26/2023	5/22/2023
Minor	no	HSB	E066/E064B	Bare wood exposed on bench top. Needs to be replaced, taped off or sealed.	4/12/2023	5/25/2023	5/8/2023
Minor	no	Chem Library	066	Need sign that says "Allergens Present." Also add one that says "Do you have a concern" for the door	4/18/2023	5/26/2023	5/23/2023
Minor	no	Proton Center		Current PPE for this space are gloves and surgical mask. Hair bonnets and gowns must be added.	4/20/2023	5/19/2023	4/20/2023
Minor	no	Proton Center		There is no specific contingency plan for Johnson lab animals that are brought to the Proton Center. Work with liaison on contingency plan.	4/20/2023	5/26/2023	4/20/2023
Minor	no	ARCF	B227	Kitchen feed area has a box of	4/20/2023	5/22/2023	4/24/2023

				expired food materials, the storage fridge needs a regular log sheet to state expiration dates for food in fridge, Eye wash log in room not recently dated. Update eye wash log.			
Minor	no	ARCF	DCM Vivarium	In multiple rooms, feed bags had been removed from the outer paper packaging and were not labeled with the mill date. Must be labelled.	4/20/2023	5/22/2023	4/25/2023
Minor	no	ARCF	216	Repaired floor cracks - repair material is green and not smooth; rough and hard to clean. Scraper and dust pan hanging on door is dirty. Repair crack and clean scraper and dust pan.	4/20/2023	5/31/2023	5/31/2023
Minor	no	ARCF	B181	B181: the environmental enrichment sheet for rats was not being filled out daily as indicated on the form. Complete form regularly.	4/20/2023	5/22/2023	5/2/2023
Minor	no	ARCF	B148D	According to the cage change log, cages were last changed on 2/28. Revise logging incoming/outgoing log so it is clear that sanitation intervals are being followed.	4/20/2023	5/24/2023	5/1/2023
Minor	no	ARCF	B205	Dates on log sheets unclear, was missing year on some and it wasn't clear if things were last done in 2022 or 2023. Complete/correct logs.	4/20/2023	5/22/2023	5/23/2023
Minor	no	ARCF	B271	NHP bite kit scrub brushes expired – discard.	4/20/2023	5/22/2023	4/21/2023
Minor	no	ARCF	B168	Freezer door cannot be completely closed due to ice build-up. Defrost. Multiple sample boxes are labeled with a date; but it is unclear if this is the expiration date. Please	4/20/2023	5/24/2023	5/1/2023

				make sure all boxes are clearly labeled with a use-buy/expiration date.			
Minor	no	ARCF	B171	Expired surgical scrub 3/2023 – discard.	4/20/2023	5/24/2023	6/26/2023
Minor	no	ARCF	B164	Cage on rack 68A, row 5, spot P had no animal information on the cage card (e.g. strain and age or arrival date). Update information.	4/20/2023	5/24/2023	4/24/2023
Minor	no	ARCF	B265	Clean cage wash: Rack washer 3 has red plastic covering both emergency pulls, but Washer 1 does not. Add.	4/20/2023	5/22/2023	5/3/2023
Minor	no	ARCF	B168	Special Diet refrigerator secondary containers of Low iron and control iron diets do not have an expiration date. Label with expiration dates.	4/20/2023	5/24/2023	5/1/2023
Minor	no	ARCF	B213A	Bedding shaving not in a bin, paper bag of bedding on floor. place bedding in appropriate bin.	4/20/2023	5/22/2023	5/15/2023
Minor	no	ARCF	B212A	Cleaning log for room was missing dates. Had the month, but no actual date that they were changed. Update log.	4/20/2023	5/22/2023	5/23/2023
Minor	no	ARCF	B162	Multiple 50 ml conical vials of fixed tissue dated 2020. Remove from the animal housing room and take to the lab.	4/20/2023	5/24/2023	5/3/2023
Minor	no	ARCF	B163	Expired puralube eye ointment and alcohol prep pads. Discard.	4/20/2023	5/24/2023	5/2/2023
Minor	no	ARCF	B185	SSR indicated medicated food and do not water; however, it appears the lab only gives medicated food. The SSR should be updated to reflect what is actually happening to	4/20/2023	5/22/2023	6/11/2023

				the mice.			
Minor	no	ARCF	B185	Unlabeled bag of what may be powdered chow. If this is given to rodents, it should be labeled and an expiration/use by date supplied.	4/20/2023	5/22/2023	5/2/2023
Minor	no	ARCF	B177	Dirty recovery cage (fecal pellets) and expired betadine surgical scrub 10/24/22. Clean cage and discard expired betadine.	4/20/2023	5/22/2023	4/24/2023
Minor	no	ARCF	B148C	There is a do not water SSR, however there were no water administration logs or body weight records present. Create and update logs	4/20/2023	5/24/2023	4/25/2023
Minor	no	ARCF	B145C	Could not locate the SSR sheet for single housing of rats. This needs to be added to the door SSR clipboard.	4/20/2023	5/22/2023	4/25/2023
Minor	no	ARCF	B203A	Cardboard boxes need to be removed, or placed in plastic wipeable bins for storage.	4/20/2023	5/22/2023	5/15/2023
Minor	no	ARCF	B212	Pig feeding station has chipped paint and was dirty. This should be cleaned and spot painted to cover up the missing paint spots.	4/20/2023	5/22/2023	5/22/2023
Minor	no	ARCF	B173	Cage cards are missing emergency contact information. Provide info.	4/20/2023	5/24/2023	4/24/2023
Minor	no	ARCF	B207A	Ferret water maze contained bedding particles and droppings. Please clean.	4/20/2023	5/22/2023	4/25/2023
Minor	no	ARCF	B152C	2 mouse cages need appropriate cage cards. Work with DCM to devise a better strategy for documenting cage change intervals (e.g. noting when new cages enter and when the room is empty).	4/20/2023	5/24/2023	4/25/2023
Minor	no	ARCF	B145C	Expired Clidox - discard	4/20/2023	5/15/2023	5/8/2023

Minor	no	ARCF	B174	Expired Clidox - discard	4/20/2023	5/15/2023	4/20/2023
Minor	no	ARCF	B170	Expired SSR in the room. please update if necessary.	4/20/2023	5/24/2023	4/20/2023
Minor	no	ARCF	B165	Biohazard room. There were several cages of mice that appeared to be in experiment and possibly inoculated with an infectious agent that did not have an orange biohazard card. Ensure all biohazardous cages are properly labeled using the required biohazard experimental card.	4/20/2023	5/24/2023	4/25/2023
Minor	no	ARCF	B161	SSR present for lab giving special food and water; however, there were no initials on the daily SSR log for 4/18 and 4/19 and experimental animals covered by this SSR were in the room. Update log.	4/20/2023	5/24/2023	5/22/2023
Minor	no	ARCF	B181	A rat was noted to have dermatitis but no vet check had been submitted and it appeared that health checks had already been done in the room. Submit sick animal report.	4/20/2023	5/22/2023	4/20/2023
Minor	no	ARCF	B167	All SSR's in this room are expired. Update those as necessary. There was no SSR for PI that had animals on a special diet. One cage has singly housed mouse with only one form of enrichment. Update SSRs. Provide second form of enrichment.	4/24/2023	5/22/2023	4/24/2023
Minor	no	ARCF	B145C	Cage change log not up to date – update log	4/24/2023	5/22/2023	4/25/2023
Minor	no	HSB	NW141A	All bare paper signage and Post-It notes posted in this space need to be encased in	4/24/2023	5/26/2023	4/24/2023

				plastic sleeves or laminated.			
Minor	no	UWMC	NN143J	Cardboard boxes need to be removed from floor and away from areas where animals are used. Tape, especially on floor holding down cables, is damaged and needs to be removed. If it must be replaced, be sure to use sanitizable plasticized lab tape.	4/24/2023	5/26/2023	4/26/2023
Minor	no	HSB	H153	Damaged chair needs to be removed.	4/24/2023	5/26/2023	5/2/2023
Minor	no	HSB	H310K	Group needs to finalize Contingency plan, to have all current and future lab members read the plan, and to post the plan near where animals are used for quick access during an emergency.	4/24/2023	5/26/2023	5/19/2023
Minor	no	HSB	K522	Group needs to finalize Contingency plan, to have all current and future lab members read the plan, and to post the plan near fume hood where animals are used for quick access during an emergency.	4/24/2023	5/26/2023	5/2/2023
Minor	no	UWMC	NN143J	Broken rubber bands on animal holder need to be replaced.	4/24/2023	5/26/2023	4/26/2023
Minor	no	HSB	H428	All bare paper signage and Post-It notes posted in this space need to be encased in plastic sleeves or laminated.	4/24/2023	5/26/2023	4/24/2023
Minor	no	HSB	H153	All bare paper signage and Post-It notes posted in this space need to be encased in plastic sleeves or laminated.	4/24/2023	5/26/2023	5/22/2023
Minor	no	HSB	H153	Any tape that is used on walls and other surfaces needs to be intact, and not crumbling	4/24/2023	5/26/2023	5/22/2023

				or curling to expose a sticky surface. Damaged tape should be replaced with sanitizable, plasticized lab tape, such as the Timemed brand—or, better yet, magnets.			
Minor	no	HSB	H310K	Discrepancy in drug log (likely the equivalent of a typo) needs to be reviewed and corrected; corrections to log should be initialed.	4/25/2023	5/26/2023	4/27/2023
Minor	no	HSB	H428B	Damaged chair need to be removed.	4/25/2023	5/26/2023	4/24/2023
Minor	no	ARCF	B285	Incomplete or unclear controlled drug log. Update log.	4/25/2023	6/5/2023	6/6/2023
Minor	no	ARCF	B241	Expired scrub kit. Replace.	4/25/2023	6/5/2023	5/5/2023
Minor	no	ARCF	B287	Chipped and peeling paint on the ceiling. Repair.	4/25/2023	6/5/2023	6/6/2023
Minor	no	ARCF	B227	Broom on floor. Mops, brooms, and dustpans should be stored on wall hooks such that they are not in contact with the floor.	4/26/2023	6/5/2023	5/4/2023
Minor	no	ARCF	B241	Drug safe not secured in the room. Attach to the floor or wall.	4/26/2023	6/23/2023	5/4/2023
Minor	no	ARCF	B141B, B141C, B141D	Freshen up tape on walls/floor.	4/26/2023	5/29/2023	5/2/2023
Minor	no	ARCF	B151B	All bare paper (including notes on paper towels and Post-It notes) posted in this space need to be encased in plastic sleeves or laminated.	4/26/2023	5/29/2023	4/27/2023
Minor	no	ARCF	B151E	CO2 signage needs to be updated to 2020 version.	4/27/2023	5/29/2023	5/22/2023
Minor	no	ARCF	B148B	Although B148B is located within the ARCF vivarium, which has its own overall contingency plan, it needs to have a plan in place for what	4/27/2023	5/29/2023	5/22/2023

				to do with animals that have been brought to the PET imaging facility when an emergency happens. Develop and post contingency plan.			
Minor	no	LSB	B120	Tape holding screen/mesh down on chamber top is not sanitizable and must be replaced with something that can be sanitized. Small zip ties might be an alternative.	4/27/2023	5/29/2023	4/27/2023
Minor	no	LSB	B116/B118B/ B124/B124B	All bare paper (including notes on paper towels and Post-It notes) posted in this space need to be encased in plastic sleeves or laminated.	4/27/2023	5/29/2023	5/26/2023
Minor	no	LSB	212M	Any tape that is used on walls and other surfaces needs to be intact, and not crumbling or curling to expose a sticky surface. Damaged tape should be replaced with sanitizable, plasticized lab tape, such as the Timemed brand—or, better yet, magnets.	4/27/2023	5/29/2023	5/26/2023
Minor	no	LSB	B116/B118B/ B118C/B124 C	Room logs incompletely maintained. Be sure to provide ALL required information on all room logs. Note dates when room is not in use.	4/27/2023	5/29/2023	5/26/2023
Minor	no	LSB	212M	Eye wash must be tested and logged weekly.	4/27/2023	5/29/2023	5/26/2023
Minor	no	LSB	415	Eye wash must be tested and logged weekly.	4/27/2023	5/29/2023	4/28/2023
Minor	no	LSB	B208	Some containers had no labels. Be sure to label all containers with their contents and any additional required information (e.g. start or expiration dates).	4/27/2023	5/29/2023	4/28/2023
Minor	no	LSB	214	Expired surgical gloves need	4/27/2023	5/29/2023	4/28/2023

				to be discarded or marked 'do not use with live animals'			
Minor	no	LSB	212M	All bare paper (including notes on paper towels and Post-It notes) posted in this space need to be encased in plastic sleeves or laminated.	4/27/2023	5/29/2023	5/22/2023
Minor	no	LSB	B124B	Any tape that is used on walls and other surfaces needs to be intact, and not crumbling or curling to expose a sticky surface. Damaged tape should be replaced with sanitizable, plasticized lab tape, such as the Timemed brand—or, better yet, magnets.	4/27/2023	5/29/2023	5/26/2023

Appendix C Departures

Prolonged restraint

Active protocols with approved prolonged restraint are as follows:

- Wild bats, held in cloth bags for transport – 2 protocols
- Farm Pigs, suspended in a sling to change dressings – 2 protocols
- Wild Birds, held and hooded for transport or equipment attachment – 5 protocols
- Wild fish, captured in gill or tow nets – 2 protocols
- Zebrafish, glued to glass coverslip or held in matrix for imaging – 3 protocols
- Mice, held in tubes for various procedures – 19 protocols
- Mice, held by head restraints – 13 protocols
- Nonhuman primates, held in chairs, tubes, and cloth jackets – 59 protocols

Housing at Non-standard Temperature

Active protocols with approved housing at non-standard temperatures are:

- Zebrafish following human cell transplantation or for heat-shock gene activation – 3 protocols
- Mice and Rats housed under cold stress or at thermo-neutral temperatures during metabolic experiments
 - 6 mice protocols, 1 rat protocol

Others

- The IACUC approved an exemption to house infant monkeys (age 2 weeks to a body weight of 1 kg) in cages that meet floor space requirements but are only 15" to 20" high. These animals climb up well, but are not adept at climbing down. The lower cage height reduces the risk of injury if an animal should fall.
- The IACUC has approved co-housing 4 juvenile nonhuman primates (up to 5 kg body weight) as a group in a Group 3 sized 4-cage rack with both vertical dividers and one horizontal divider removed. This innovative configuration meets the volume regulations for Group 3 animals and, while being shy of the floor area standard, provides the animals increased opportunity to express species-typical behavior.
- The IACUC has approved a L shaped housing variance combining cages together in configurations that provide increased vertical space for the animals and more than standard floor space but with part of the space <36 inches (but at least 32 inches) high. This will offer more choice in housing configurations to encourage species-typical behavior such as locomotion and exploration.
- The IACUC has approved scattering food on the floor of NHP housing compounds to minimize contamination and ensure access to food and foraging opportunities for all animals.
- The IACUC has approved to allow for 28 day cage changes for singly housed gerbils.
- The IACUC has approved to change cages, wire-tops, and water bottles within the isolator in the Gnotobiotic Animal Core (GNAC) facility on an as-needed basis, such as due to damage or crusted material which cannot be scraped off. Since mice are in a germ-free, sterile environment, no microorganisms are present within the isolator. Bedding in cages within the isolator is changed at least once a week, or more often if necessary.

Appendix D IACUC Program Review Group Reports

The Animal Care and Use Program – Was found to be acceptable

IACUC members do not typically have access to Inter-Institutional Agreements. Members don't need to review these, but it would be helpful if a template document was posted somewhere where members could confirm that all required information is included in these written agreements.

Disaster Planning and Emergency Preparedness - Was found to be acceptable

IACUC members do not have the expertise to critically review the disaster plan contents for each animal facility and satellite location, but could confirm that all of the required components are included in current plans if there was a new cover page attached to each disaster plan. This new cover page could include the items required by the Guide (i.e. the items in the OLAW Program Review Checklist under Section 2) and the date of the most recent version of the plan. At the time of each semi-annual review, the team assigned to this section could ask to see the cover pages for all of the facilities required to maintain a disaster plan.

IACUC – Was found to be acceptable

It was noted that it is difficult to review protocols with a large number of complex experiments. It is recommended that, to the extent possible, protocols and experiments should be written to convey the animal experience in a way that is easily understandable to both experienced and lay reviewers. This could be achieved by grouping like experiments and also breaking down complex protocols into various arms differentiated by goals and/or the animal experience.

IACUC Membership and Functions - Was found to be acceptable

No suggestions for improvement

IACUC Training – Was found to be acceptable

Similar to the designated member review (DMR) training in which a packet guide is sent to new reviewers, a document summarizing what to expect with tips on preparing for the first meeting was suggested. The new mock site visit training room was found to be helpful. Additionally, a mechanism for introducing new members with mini biographies could facilitate their integration into the committee.

Regarding ongoing education, having semi-regular refreshers on policies or on procedures would be helpful. For example, reminders about what types of response letters (acknowledgement, reprimand, etc) can be sent to investigators and what the process of suspending a protocol looks like.

IACUC Records and Reporting Requirements - Was found to be acceptable

No suggestions for improvement

Veterinary Care – Was found to be acceptable

On the previous semi-annual report, the IACUC noted a minor deficiency related to the labeling of drugs, particularly mixed or diluted anesthetic drugs in secondary containers. The IACUC at that time suggested that the institution could implement better training to investigators who maintain their own anesthetic drugs. To follow up on this, the instructional designer in the Center for Laboratory Animal Training (CLATR) was asked about future training and there is a plan to create a lesson around this topic.

Related to the item under the Surgery section that reads "Researchers have appropriate training to ensure good technique", it is acknowledged that recent improvements have been made regarding surgical training communication. Those changes will be beneficial to the program.

Additional ways to help investigators with their surgery and post-procedure care documentation, to improve consistency and compliance was discussed. OAW and CLATR have templates and examples available. Additional outreach is suggested through OAW and/or CLATR about these templates, through the newsletter or post-approval monitoring program, to make sure investigators are aware of these resources. It was wondered if pertinent training and certification requirements, documentation requirements, or simply reminders to check the IACUC protocol might be helpful to provide directly on the templates. Additional discussion or training for the IACUC would be helpful to clarify IACUC expectations in terms of documentation.

Finally, during IACUC site visits, it would be helpful if lab members familiar with the procedures, such as the individual who performs the surgeries, are present during the visit to help answer IACUC member questions and review related documentation. We request that OAW explore incorporating that into the site visit scheduling.

Personnel Qualifications and Training - Was found to be acceptable

Recommendation to ALL animal users: Please take the time to re-read your protocol/experiment prior to starting any live animal work. Also, recommend that groups document their lab member training.

Occupational Health & Safety of Personnel - Was found to be acceptable

No suggestions for improvement

Personnel Security - Was found to be acceptable

No suggestions for improvement

Investigating Animal Welfare and Concerns - Was found to be acceptable

No suggestions for improvement

Summary of program review suggestions/improvement items

- Provide copy of inter-institutional agreement template for review.
- Provide a new cover page attached to each disaster plan. This new cover page should include the items required by the Guide (i.e. the items in the OLAW Program Review Checklist under Section 2) and the date of the most recent version of the plan.
- It is recommend that, to the extent possible, protocols and experiments should be written to convey the animal experience in a way that is easily understandable to both experienced and lay reviewers.
- Send new IACUC members a document summarizing what to expect with tips on preparing for the first meeting.
- Add mini-biographies for new IACUC members.
- Semi-regular refreshers on policies or on procedures would be helpful. For example, reminders about what types of response letters (acknowledgement, reprimand, etc) can be sent to investigators and what the process is to suspend a protocol.
- Better training concerning maintenance of anesthetic drugs.
- Additional outreach to help investigators with surgery and post-procedure care documentation.
- IACUC discussion and training would be helpful to clarify IACUC expectations about post-procedure care documentation.
- For IACUC site visits OAW should work to ensure that lab members are present that are familiar with procedures in the facility.
- Recommendation to all lab users to reread protocol and experiments prior to starting live animal work.
- Recommendation to all groups to document lab member training.

Concurrence Letters

[Concurrence Image – Jane Sullivan |

[Concurrence Image – Christina Cruzen |

[Concurrence Image – E.S. |

[Concurrence Image – K.G. |

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Concurrence Image – A.W. |

Minority Views

None

