

University of Washington
OCTOBER 19, 2023 IACUC Meeting Minutes

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

Further Discussion: *none*

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

Attending Veterinarian's Report – JFI (on behalf of CC)

I have checked with the leadership at all sites and have one adverse event to report at this time.

On 9/26/2023, the lights in 5 nonhuman primate rooms did not turn off when scheduled and remained on all night. The animals were assessed by a veterinarian the following morning and there were no health concerns noted. These animal rooms do have light alarms, but these alarms did not go off. This may have been due to an ongoing transition between environmental monitoring systems. The night staff member assigned to verify light levels visually noted the room lights to be on after the designated dark phase. The individual attempted to turn off the lights manually but the switch did not work. Appropriate contacts were made – including to primate center management and facility operations staff. Facility operations staff attempted to override the system to turn off the lights but were unable to turn them off. The following day, additional expertise was sought and a mechanism for overriding the system was established. Since this time, we continue to work with the company responsible for the system transition but we know that lights are not automatically turning on and off consistently as designed. We have staff manually verifying lights in all animal rooms every morning and every night and facility operations are intervening with overrides as needed to ensure animals have appropriate light cycles. There have been no more instances of constant light in any animal rooms.

Protocol Monitoring

We have 22 protocols on enhanced veterinary monitoring at this time. No new protocols were added in the past month and one protocol was removed from monitoring due to retirement of the PI. Of these 22 protocols, 15 of them were placed on monitoring proactively at the time of procedure approval to provide enhanced support during development or implementation of complex procedures. The other 7 were placed on monitoring following an unexpected outcome. Of the 22 protocols, only 5 of them are currently performing the procedure for which they are on monitoring. There are no concerns about those procedures at this time.

Announcements and Follow-Up Information

The committee requested updates on a number of ongoing matters.

Regarding protocol 4266-10 (rodent influenza study), the committee reviewed an amendment via FCR.

After robust discussion about the proposal, the amendment was approved but it suggested that enhanced monitoring be developed in consultation with the veterinary staff. At this time, the lab has been working with vet staff regarding this request. They have agreed to twice daily monitoring during the peak infection days (which were already defined in the protocol). This was consistent with IACUC discussion around that topic. They have also created a numerical scoring table that characterizes general appearance, activity level, and weight loss to objectively score these parameters and have established euthanasia criteria using this combination score. This clinical scoring will be used for any animals with >20% weight loss. In my opinion, this is a significant improvement over the previous proposed monitoring but it should be noted that this scoring table does not include any specific monitoring of respiratory characteristics. I have

University of Washington
OCTOBER 19, 2023 IACUC Meeting Minutes

recommended they reconsider this and modify the scoring paradigm to include this. They have not yet started this study, and the first cohort of mice will be utilized to assess these new monitoring proposals. The veterinary monitor will be participating in the post-procedural observations to ensure these objective scores to be used by the lab match her veterinary assessments.

The committee had also requested additional information regarding the process of responding to HVAC alarms in one of our south lake union facilities. I apologize, but I have not yet met with the involved departments to clarify that process, but I do hope to have an update ready by the next meeting.

Lastly, at our most recent meeting, the committee requested additional information regarding responsibilities of Research Support Services at the primate center as they relate to a recent protocol noncompliance. We have begun speaking with some members of the group to assess training and communication of expectations but conversations are still ongoing. We hope to have a full report to the committee at our November meeting.

OAW Director's Report – JFI

IACUC metrics – IACUC metrics are in the meeting folder

Other Updates –

On September 12-14, the USDA conducted a routine inspection of our animal program. After inspection of facilities and review of records, the USDA inspectors identified four non-compliant items. All 4 of these items had been previously self-reported to the USDA and reported to the IACUC, and all were corrected prior to the inspection. The USDA Inspection Report has been posted on our website.

Letter responses:

Response to Letter 4450-01– In August, the committee voted to send a letter of counsel in response to an incident in which a cage of two female mice was found without food, resulting in the death of one mouse. This occurred during the transition of the cage off of the Special Service Request (SSR), when feeding responsibilities would have transitioned from research staff to husbandry staff. The PI responded that they have taken several corrective actions to prevent a similar incident from accruing in the future. The corrective actions include:

- Retraining of the research technician and continued monitoring to ensure a high level of competence in animal care.
- Implementation of a cloud-based digital monitoring system that explicitly indicates when mice are removed from the SSR, acting as a visual indicator for supervisors to follow up with technicians who have relocated the mice.
- In collaboration with DCM staff, they have devised a system to quickly identify cages that have recently been removed from SSR, including research technicians flagging cages with a unique blue strip of paper, and DCM staff prioritizing evaluation of flagged cages to confirm that food and water is provided before removing the blue flag.

University of Washington
OCTOBER 19, 2023 IACUC Meeting Minutes

The IACUC was satisfied with the lab's response and their plan to correct this issue.

Noncompliance

2183-02 follow-up

At last month's meeting an event was reported to the IACUC in which, during a surgery certification procedure on a mouse, several deviations from the protocol were identified, including that lidocaine was not administered as described in the protocol, and the drill burr was sterilized by a hot bead sterilizer rather than autoclave. It was reported to the committee at that time that 12 mice over the preceding 3 months were impacted, with surgeries performed by 2 different surgeons. There were no observed signs of pain or abnormal behavior following these surgeries. After discussion, the IACUC determined that more information was needed, and requested that the AV, OAW Director, and/or IACUC Chair meet with the research group and report back to the committee.

All three of us met with the research group to discuss this incident. Included in that meeting were the PI as well as the two surgeons involved. First, I want to confirm that all individuals involved had completed the required surgery training courses provided by CLATR. The noncompliance was identified during certification process of a new surgeon, and the other involved surgeon is certified and was training and supervising the new surgeon. One primary gap that led to the noncompliance was in the lab's process for training of new personnel. To strengthen that process, the group indicated that moving forward they will more intentionally review the protocol in-person with all new trainees. Additionally, they will do more cross-checking of performance between the experienced surgeons as well as involving multiple experienced surgeons with training of new personnel so that any variation between surgeons is identified. The group has also created a checklist that is posted in the surgery area that includes key elements of the prep, surgery, and post-surgery processes.

Another gap that was identified was in the communication of protocol changes to the rest of the lab members. The research group recognized that some relevant changes were made to the surgery procedure earlier this year, including updating the use of local anesthetic during surgery, and these changes were not effectively communicated to the rest of the group. Although lab members were notified by email of those changes, moving forward any changes to the protocol will now also be reviewed in-person at a lab meeting, and their checklist will be updated as needed.

The Director suggested that the committee send some type of letter, since no action has been taken yet. The Chair asked for the IACUC's opinions on what type of letter to send. It was reiterated that deviations to the protocol were identified during certification, however there were no negative effects on the animals. This incident was self-reported during the certification, and this lab doesn't have prior incidents on record. Members feel that this is a serious matter and involved analgesics, so a letter of reprimand is warranted.

Motion was made and seconded: to send a letter of Reprimand

Further Discussion: none

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

Standard Operating Procedures

- Standard procedures – AS
 - 11 procedures with changes, 7 procedures with no changes. A summary of changes is included under Supporting Documents in the meeting folder.

University of Washington
OCTOBER 19, 2023 IACUC Meeting Minutes

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

Further Discussion: *none*

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

Closing Business:

The Meeting was brought to a close at 3:00 pm.