Members Present: AW (remote) GS (remote) KS (remote)
CH (remote) JM (remote) MB (remote)
CM (remote) JPVH (remote) MK (remote; from 2:37 PM)
DM (remote) JS (remote) ML (remote)
FRR (remote) KG (remote) SRH (remote)
SL (remote)

Members Absent: AB JA

Opening Business
- The IACUC Chair called the meeting to order at 2:32 pm.

Confirmation of a Quorum and Announcement
- Quorum was confirmed by JS.

Approval of the IACUC Meeting Minutes
- The IACUC Chair called for the approval of the April 16, 2020 meeting minutes.
  
  Motion was made and seconded: to approve the April minutes as written.
  Further Discussion: None.
  Vote: Approved with 15 members voting in favor, 0 against and 0 abstentions.

Attending Veterinarian’s/OAW Director’s Report - KS
- Adoptions - 4 gerbils adopted out in the last month.

- OAW Assistant Director is retiring June 15th and today is his last IACUC meeting. New Assistant Director will be starting on June 1st.

- IACUC metrics- see meeting documents.

- Facility issues:
  - There were 3 ARCF rooms with various lighting issues that were resolved within 1 hour. 2 of the 3 rooms did not have any mice at the time the problem was noted.

2:37 PM Member Entered

- Protocol Monitoring:
  - Twenty-one total protocols. Of the protocols, 12 involve surgery, two restraint (and sx), one conscious restraint, 1 tumor modeling, 4 miscellaneous (tape skirt, infection, water quality). Seven are inactive right now. Still minimal work being done on most of these protocols at this time. Work on 2225-06 is being moved to a different protocol (4486-02) under a different PI but it will remain under vet monitoring.
Follow-up to previously reported adverse events:
  - ARCF NHP escapee adverse event: The male escapee is still being kept separate from his social partner while reinforcement of the connection between the 2 cages is being finalized. Once the caging is finished, Behavioral Management Services will work on re-introducing the male NHP to his social partner.

  - 4390-01: PI response to Letter of Counsel. As indicated in the letter, the lab believes these rats were given too high a dose of parasites due to human error. Parasites used for infection must be prepared fresh, and therefore the lab cannot establish a laboratory stock of validated innocula. These parasites are quantified by direct visualization and counting under a microscope, and therefore no additional measures can be implemented to ensure proper dosing. The PI has reviewed with the lab member involved the procedures for quantification and inoculum preparation as well as the monitoring requirements detailed in the protocol. The PI will discuss this case with all lab members at their next lab meeting to remind everyone of the proper procedures.

Adverse Events:
  - ABSL3 facility: One cage of 5 mice was not properly docked in the housing rack after a husbandry staff member changed water bottles in all cages. As a result, airflow was not reestablished when the cage was returned to the rack and all animals in the cage died. Corrective Actions: Moving forward, the ABSL3 facility is requiring, barring extenuating circumstances, that two people work in tandem during pre-scheduled, routine water bottle changes similar to what is already required for pre-scheduled, routine cage changes. Both individuals will be responsible for ensuring that cages are appropriately docked in the rack. The ABSL3 facility will continue with the standard process of visually confirming that individual cages that have been removed from the rack are correctly docked. The responsible individual has been re-trained by both the BSL3/ABSL 3 Facility Director and the Facility Manager.

  - Reported to OLAW.

  - The AV confirmed that this adverse event was self-reported by the ABSL-3 Facility Manager.

  - 4187-02: Self-reported. 3 rats had spinal injury surgery on the same day. Two rats died during surgery and one rat was found dead the day after surgery. After surgery the group realized the rats had received an overdose of xylazine. These animals were the anesthetized with a recently acquired bottle of xylazine which was at a higher concentration than normally used. Corrective Action: The lab has implemented a policy of triple checking the concentration of stock drug bottles - once when received, once when the bottle is brought from "in reserve" to "active" status, and every time drug is drawn from the bottle to make a dilution for ketamine/xylazine anesthesia.

  - Reported to OLAW.

  - The AV confirmed that this lab does not have a prior history of non-compliances.

Motion was made and seconded: to send a letter of acknowledgement.

Further Discussion: None.

Vote: Approved with 16 members voting in favor, 0 against and 0 abstentions.
At Western facility, 1 NHP was left in a trapping run for at least 12 hours without access to food or water. She was found to be moderately dehydrated, received immediate treatment and recovered by the next day. An investigation revealed that both an AT and a vet tech had seen her in the compound on Saturday morning when she received medication. On Sunday afternoon, a different AT and vet tech saw that she was not in the compound, and looked in the trapping run but did not find her. She was found in the trapping run the next morning. There was no reason to move her into the trapping run on either Saturday or Sunday, and no one admitted to doing so. The doors from the compound into the trapping runs are hydraulic doors whose controls are not accessible to the animals. Corrective Action: Water bottles will be added to those runs so animals always have access to water. HR is handling any possible personnel performance issues related to this event.

Reported to USDA and OLAW.

An IACUC member asked if animals are double-checked at the end of a shift. The vet of the WaNPRC confirmed the use of a log sheet. The IACUC discussed the trapping run size and configuration. The IACUC discussed options for sending a letter to the facility upper management. The IACUC discussed the importance of self-reporting instead of punitive actions held against individuals. The IACUC Chair has tabled the discussion until more information is available.

- Non-compliances: None

- From Arizona
  - Facilities items: No items to report.
  - Adverse events: No adverse events to report.

Standard Operation Procedures / Policies / Guidelines
- Adhesion Grading Scale in Non-Human Primates – KS
  - This policy was updated in format, but there were no other revisions made.

  Motion was made and seconded: to approve the policy as written.
  Further Discussion: None.
  Vote: Approved with 16 members voting in favor, 0 against, 0 abstentions.

- Prolonged Physical Restraint - KS
  - This policy was updated in format, but there were no other revisions made.

  Motion was made and seconded: to approve the policy as written.
  Further Discussion: None.
  Vote: Approved with 16 members voting in favor, 0 against, 0 abstentions.

Other Business
- WaNPRC Common Use Drug Formulary – CH
  - The WaNPRC has added an NSAID and a magnesium-alternative drug to the drug formulary.
Motion was made and seconded: to approve the drug formulary as written.

Further Discussion: None.

Vote: Approved with 16 members voting in favor, 0 against, 0 abstentions.

- **L-Shaped Housing Variance – CH**
  - The WaNPRC requests the approval of a 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.

  Motion was made and seconded: to approve the housing variance as written.
  Further Discussion: None.
  Vote: Approved with 16 members voting in favor, 0 against, 0 abstentions.

- **COVID-19 updates – KS**
  - Animal care and veterinary staffing has continued to be adequate, and therefore no modifications to husbandry practices have been necessary. Face coverings are required in all animal facilities and maximum capacity signage is posted for all housing and procedure rooms.

  - AUTS has resumed rodent hands-on training and facility orientations with limited capacity as all sessions are one-on-one in order to maintain a 6 ft physical distance as much as possible and with appropriate PPE to limit potential exposure. We are currently working through the waitlisted requests. Scheduling of surgery training and surgery certification has resumed and instruction can begin as early as next week.

  - Semi-annual inspections: In May, we have been able to inspect some additional procedural lab spaces. The remaining 8 uninspected lab spaces are not currently in use and those labs will be inspected once those areas are back in use.

  - **IACUC information related to the OAW Return to Work Phase 1 plan and probably additional phases:**
    OAW reviewers/liaisons will continue to work remotely.

Most IACUC functions including review and approval of animal use protocols by DMR and monthly IACUC meetings (include public participation) will continue to be carried out remotely.

Review of animal use spaces will continue. Site visits of new research space and of existing animal use spaces will be done in-person.

- A minimum number of IACUC site visitors will be used (although no IACUC member may be denied participation).
- IACUC members will be asked to volunteer for site visits. It is anticipated that IACUC members already on campus for other reasons will mostly be used.
- Proper distancing and room occupancy will be maintained at all times. Appropriate PPE will be worn and hygiene practices followed.
- Vivarium visits will be coordinated with DCM or WaNPRC facility managers.
Lab space visits will be coordinated with the PI/lab manager to ensure lab-member availability. Inactive labs may have visits delayed beyond the usual six-month requirement, but will need IACUC re-inspection prior to animals again being used in the space.

- Semi-annual program review – LI
  - LI reviewed the process for the upcoming semi-annual program review. There were no questions.

Closing Business:
The Meeting was brought to a close at 3:36 pm. The floor was opened to public comment.