

THE UNIVERSITY OF GEORGIA
A3437-01
ANIMAL WELFARE ASSURANCE
in accordance with the PHS Policy for
Humane Care and Use of Laboratory Animals

I, David Lee, as named Institutional Official for animal care and use at The University of Georgia (A3437-01), provide assurance that this Institution will comply with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy).

I. Applicability of Assurance

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

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

"Institution" includes the following branches and major components the University of Georgia: College of Agriculture and Environmental Sciences, College of Arts and Sciences, College of Family and Consumer Sciences, College of Pharmacy, College of Veterinary Medicine, College of Education, College of Public Health, School of Ecology, and School of Forestry and Natural Resources.

"Institution" also includes the following: the Georgia Health Sciences University/University of Georgia Medical Partnership, a new medical school campus at the Institution.

- B. The following are other institution(s), or branches and components of another institution:
None

II. Institutional Commitment

- A. This Institution will comply with all applicable provisions of the [Animal Welfare Act](#) and other Federal statutes and regulations relating to animals.
- B. This Institution is guided by the "[U.S. Government Principles for the Utilization and Care of Vertebrate Animals Used in Testing, Research, and Training](#)."
- C. This Institution acknowledges and accepts responsibility for the care and use of animals involved in activities covered by this Assurance. As partial fulfillment of this responsibility, this Institution will ensure that all individuals involved in the care and use of laboratory animals understand their individual and collective responsibilities for compliance with this Assurance, and other applicable laws and regulations pertaining to animal care and use.
- D. This Institution has established and will maintain a program for activities involving animals according to the *Guide for the Care and Use of Laboratory Animals* ([Guide](#)).

- E. This Institution agrees to ensure that all performance sites engaged in activities involving live vertebrate animals under consortium (subaward) or subcontract agreements have an Animal Welfare Assurance and that the activities have Institutional Animal Care and Use Committee (IACUC) approval.

III. Institutional Program for Animal Care and Use

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

Responsibility for the institutional research program is vested with the Office of the Vice President for Research. The University Director of Animal Care and Use (UDACU) is the Attending Veterinarian, and responsible for oversight of the entire institutional animal care and use program. The AV/UDACU reports to the Associate Vice President for Research Compliance (AVPRC), who reports to the IO, Vice President for Research, David Lee. The AV/UDACU has direct access and frequent communication with the AVPRC, and the AVPRC has direct access and frequent communication with the IO. Nevertheless, there is nothing organizationally or operationally that would discourage or prohibit the AV/UDACU from bringing an issue straight to the IO. An organizational chart for the Program is appended at the end of this Assurance.

- B. The qualifications, authority, and percent of time contributed by the veterinarian(s) who will participate in the program are as follows:

The Laboratory Animal Veterinarians shall implement the institutional Program for Animal Care and Use by conducting procedures as necessary to fulfill University Policy and the Institution's obligations under this Assurance. The Laboratory Animal Veterinarians have direct program authority for all animal activities at the institution, including access to all animals. Laboratory Animal Veterinarians are authorized to monitor all animal care and use activities and to cite and refer to the IACUC any activity that is not in compliance with the *Guide*, the Animal Welfare Act Regulations, or any other applicable standards relating to the care and use of animals. Immediate action may be taken by the Veterinarians to resolve situations which may endanger animal life and/or could involve inordinate pain, distress, or suffering.

Name: Christopher S. King

Qualifications:

- Degrees: DVM, DACLAM
- Training and/or experience in laboratory animal medicine: 29 years of post-DVM experience in laboratory animal medicine; completed post-doctoral training in laboratory animal medicine at the Yale School of Medicine; has extensive experience with the care of traditional laboratory animals as well as agricultural animals, primates, fish, reptiles and amphibians.

Authority:

Dr. King is the AVPRC. The Vice President for Research and Institutional Official has delegated authority to Dr. King to coordinate the formulation of University Policy and conduct procedures necessary to carry out institutional obligations under this Assurance. Dr. King serves as one of the Institution's Veterinarians supporting the animal care and use program.

Time Contributed to Program: Full time employee with 25% commitment to the animal care and use program.

Name: Leanne C. Alworth

Qualifications:

- Degrees: DVM, MS, DACLAM

- Training and/or experience in laboratory animal medicine: 19 years of post-DVM experience in laboratory animal medicine; completed post-doctoral training in laboratory animal medicine at the University of Missouri; has extensive experience with the care of traditional laboratory animals as well as agricultural animals, primates, fish, reptiles and amphibians.

Responsibilities:

Dr Alworth is the UDACU and serves as the Institution's Attending Veterinarian. The Director, Dr. Alworth, has the primary direct program authority for all animal activities at the institution, including access to all animals.

Time Contributed to Program: Full time employee with 100% commitment to the animal care and use program.

Name: Steven B. Harvey

Qualifications:

- Degrees: DVM, MS, DAACLAM
- Training and/or experience in laboratory animal medicine: 19 years of post-DVM experience in laboratory animal medicine; completed post-doctoral training in laboratory animal medicine at the Pennsylvania State University; has extensive experience with the care of traditional laboratory animals as well as agricultural animals, primates, fish, reptiles and amphibians.

Responsibilities:

Dr. Harvey is an Assistant Director of University Research Animal Resources (URAR) and serves as one of the Institution's Veterinarians supporting the animal care and use program.

Time Contributed to Program: Full time employee with 100% commitment to the animal care and use program.

NB: UGA is currently hiring a new Director of University Research Animal Resources. The individual in this role will serve as one of the Institution's Veterinarians supporting the animal care and use program and lead the URAR program. The authority and responsibility, otherwise, for this position is identical to the other program Veterinarians. This is a full time position with 100% commitment to the animal care and use program.

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

D. The IACUC will:

- 1) Review at least once every 6 months the Institution's program for humane care and use of animals, using the *Guide* as a basis for evaluation. The IACUC procedures for conducting semiannual program reviews are as follows:

At least every six months, in the course of conducting facility inspections, the IACUC site visitors review the animal care and use program elements during a question and answer/fact finding interview using the HHS *Guide* as a basis for evaluation. A semi-annual program and facility review checklist, modeled after the sample provided by OLAW, guides the review process. All IACUC members are invited to attend the semi-annual program evaluations. Program reviews are conducted by one or more members of the IACUC, which usually, but do not necessarily, include the IACUC Coordinator. Furthermore, program review includes an IACUC self-assessment once every six months using the Policy, the *Guide*, and USDA Animal Welfare Act Regulations as the basis for evaluation. The draft report is prepared and submitted by the IACUC Coordinator in

preparation for review by the full committee. The reports are sent to the committee six days before each monthly convened meeting. During the meeting of the quorum, the final report(s) of program evaluation(s) are reviewed, discussed as needed, and each voting member present signs the final report for filing. The reports are sent to the Institutional Official, Dr. David Lee, and to animal resource directors, other administrators, and facility managers as indicated to ensure that any compliance issues are addressed.

- 2) Inspect at least once every 6 months all of the Institution's animal facilities, including satellite facilities and animal surgical sites, using the *Guide* as a basis for evaluation. The IACUC procedures for conducting semiannual facility inspections are as follows:

The IACUC inspects all animal facilities at least once every six months. IACUC site visitors inspect the animal facilities using the HHS *Guide* as a basis for evaluation. A semi-annual program and facility review checklist, modeled after the sample provided by OLAW, guides the inspection process. All IACUC members are invited to attend the facility inspections. Inspections are conducted by one or more members of the IACUC, which usually, but do not necessarily, include the IACUC Coordinator. A minimum of two members conduct each inspection of facilities that include USDA Animal Welfare Act-regulated animals. Inspection sites include all AAALAC-accredited animal facilities included in this Assurance as well as a host of other agricultural and experiment station sites. If indicated, some of the committee members make follow-up inspections to assure that standards are being maintained or to make certain that corrections or improvements are progressing according to the committee recommendations. Significant deficiencies (serious deviations from the *Guide*), including those that affect animal health and well-being or human safety, are distinguished from lesser problems and are treated accordingly. The draft report is prepared and submitted by the IACUC Coordinator in preparation for review by the full committee. The reports are sent to the committee six days before each monthly convened meeting. During the meeting of the quorum, the final report(s) of program evaluation(s) are reviewed, discussed as needed, and each voting member present signs the final report for filing. The reports are sent to the Institutional Official, Dr. David Lee, and to animal resource directors, other administrators, and facility managers as indicated to ensure that any compliance issues are addressed.

- 3) Prepare reports of the IACUC evaluations according to PHS Policy IV.B.3. and submit the reports to the Institutional Official. The IACUC procedures for developing reports and submitting them to the Institutional Official are as follows:

Following every semi-annual program evaluation and facility inspection, a draft report is prepared and submitted by the IACUC Coordinator in preparation for review by the full committee. The reports include a description of the nature and extent of the institutions adherence to the *Guide* and the PHS Policy, including any IACUC-approved departures and reason for each departure; identification of any significant or minor deficiencies in the program or facility with a reasonable and specific plan and schedule for correction; any minority views of the IACUC; identification of facilities accredited by AAALAC, International; and the signatures of a majority of the IACUC members. The reports are sent to the committee six days before each monthly convened meeting. During the meeting of the quorum, the final report(s) of program evaluation(s) are reviewed, discussed as needed, and each voting member present signs the final report for filing. A written report is sent to the institutional official, Dr. David Lee, and to animal resource directors, other administrators, and facility managers as indicated to ensure that any compliance issues are addressed. Significant deficiencies (serious deviations from the *Guide*), including those may be a threat to animal health and safety or human safety, are distinguished from minor deficiencies and identified as such in the inspection report. However, immediate remedial action is initiated before a final report if significant deficiencies are identified during an inspection. Otherwise, a proposed plan and schedule for correction is included in the inspection report. If the report contains recommendations for improvements or corrections of deficiencies, it is a shared responsibility of the animal resource director, dean, department head, division head, or investigator(s) involved to arrange for the necessary corrections. IACUC recommendations include a timetable for correction

of the deficiencies. The effort for correction of cited deficiencies is coordinated by the Office of Animal Care and Use and animal resource directors. Within thirty days after the written report from the IACUC is sent, a response must be submitted to the committee accepting the proposed plan and schedule or providing an alternate plan and schedule. The committee will evaluate the plan and schedule to correct the deficiencies with approval or disapproval. In the case of disapproval, a revised plan must be submitted for re-evaluation by the committee. Failure to submit an appropriate plan for improvement, or non-implementation of the plan, will constitute failure to cooperate with the committee. In situations where a college, department, or division fails to cooperate with the committee, the committee will so notify the responsible administrator(s) in writing with a copy to the Director of Animal Care and Use, and the Vice President for Research. After receipt of this notification, a college, department, or division will have 30 days in which to submit a plan of compliance. If, after this 30-day period, a college or department does not submit a plan or if the plan is deemed inadequate, the committee may suspend the use of animals in that unit, as described in III.D.10, until compliance is achieved.

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

The procedures for "Reporting Concerns in Animal Care" is written as an institutional policy for helping to resolve concerns, and serve as a mechanism to help answer questions related to animal care and use. The policy is written as a standard operating procedure and is included as part of required animal care and use compliance training sessions for faculty, staff, and animal resource personnel. A link for reporting concerns is prominently located on the IACUC and URAR websites. All animal facilities have one or more posters posted in prominent locations indicating that the welfare of animals used at the institution is a serious responsibility shared by all and contact information and web links are provided. Employees and others are encouraged, without fear of reprisal, to try to resolve their questions or concerns at the immediate administrative level, but then to move to the next level of responsibility within the department or college. The concerns can also be taken to the Attending Veterinarian or to the Chair of the IACUC or any IACUC member(s). Concerns can be made anonymously and the anonymity of anyone voicing a concern is protected. In an emergency situation, the Attending Veterinarian can immediately intervene, informing the IACUC Chair, AVPRC and IO. The IACUC will review the nature, substance, and circumstances of the concern at a convened quorum of the committee. A subcommittee to investigate the matter is charged if the IACUC members believe the concerns are valid. The subcommittee submits a report to the IACUC. The IACUC sends a final report with recommendations for resolution to the Institutional Official, Dr. David Lee, and to the Director of Animal Care and Use and other administrators and employees as needed. If the situation involves serious non-compliance with *Guide* or regulations of the Animal Welfare Act, the IACUC is authorized to withhold approval of activities involving animals or suspend such activities, as described in III.D.10, and notify OLAW and/or the USDA as indicated.

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

The committee routinely makes written recommendations to the Institutional Official regarding fundamental aspects of the institution's animal program, facilities, or personnel training. This is done in the form of a quarterly briefing by the Director where reports of semi-annual program evaluations and facility inspections are reviewed. These reports include comments or assessment of personnel training, staffing for animal care, occupational health and safety, facilities maintenance, and availability of support services for animal resources. Special issues of concern are also reported in writing to Dr. Lee with copies to other university administrators as needed.

- 6) Review and approve, require modifications in (to secure approval), or withhold approval of PHS-supported activities related to the care and use of animals according to PHS Policy IV.C.1-3. The IACUC procedures for protocol review are as follows:

Prior to beginning any activity requiring IACUC review and approval, the PI must complete an Animal Use Proposal (AUP) utilizing a web-based tool. The PI is frequently aided in this process by a primary Veterinary Reviewer (VR) (VRs listed in Section III-B), who consults with the PI on techniques to minimize pain and distress and on the most appropriate use of anesthetics, analgesics, and tranquilizers. Once a PI has completed the AUP form, it is submitted electronically to the Office of Animal Care and Use (OACU). The IACUC Coordinator conducts a preliminary review of all AUPs to determine if they are complete. The IACUC Coordinator then assigns the AUP to the appropriate VR. The VR reviews the AUP for completeness and, if needed, consults with the PI on techniques to minimize pain and distress and on the most appropriate use of anesthetics, analgesics, and tranquilizers. Once this review is completed and any necessary revisions are made, the VR electronically signs-off on the AUP, and it is returned to the OACU for further review and processing.

AUPs reviewed by the IACUC are designated into one or more of four categories and reviewed as follows:

Category A: Use of animals in experimental procedures that would be expected to produce little or no pain or distress. This category is reviewed by the VR as the prereviewer. Once the VR completes his/her review, it is distributed via a "weekly list" to provide an opportunity for the IACUC to refer any 'A' protocols proposed for DMR for the alternative full committee review. In the event that there is no call for FCR, the protocol is reviewed by designated member review. The IACUC Chair has provided a list of approved designated member reviewers to the IACUC Coordinator. The IACUC Coordinator assigns a designated member reviewer from this list; this assignment is then authorized by the Chair.

Category B: Use of animals in procedures that involve minor pain or distress of short duration, or in procedures where pain and distress are alleviated through the use of analgesics or tranquilizers. This category is prereviewed by the VR and at least one IACUC member. Once the VR completes his/her review, the IACUC coordinator sends the protocol to the IACUC member for a second prereview. Once the VR and IACUC member have completed their prereviews of the AUP, it is distributed via a "weekly list" to provide an opportunity for the IACUC to refer any 'B' protocols proposed for DMR for the alternative full committee review. In the event that there is no call for FCR, the protocol is reviewed by designated member review. The IACUC Chair has provided a list of approved designated member reviewers to the IACUC Coordinator. The IACUC Coordinator assigns a designated member reviewer from this list; this assignment is then authorized by the Chair.

Category B (Multiple Major Surgery): Use of animals in procedures that involve multiple major surgeries resulting in minor pain or distress of short duration or where pain and distress are alleviated through the use of analgesics or tranquilizers. All Multiple Major Surgery protocols require a full committee review, as described below for Category C.

Category C: Use of animals in procedures that involve significant but unavoidable pain or distress to the animal. All Category C proposals are held for full committee review at the monthly meeting, or at specially called meetings, as necessary. All committee members receive a copy of all C category proposals (and any other AUPs on the agenda) six days prior to the meeting.

Category D: Use of invertebrate animals, cell cultures, embryonated eggs, certain biologic products, or tissues obtained post-mortem from vertebrate animals, or observation of wildlife species. This category is approved by the Veterinary Reviewer.

There is no expedited review process.

The "weekly list" is used to provide an opportunity for the IACUC to refer any designated member reviewed protocols ("A" and "B" animal use category) for full committee review. Protocols are posted to the weekly list only after they have gone through the appropriate VR and (if applicable) second member prereview process and have been certified by the prereviewer(s) for posting on the weekly list. The list is distributed by email to the committee members every week, typically on Tuesday. Information transmitted includes investigator name, AUP number, title of AUP, animal species, number of animals proposed for use, and a brief description that addresses whether the proposal includes surgery or other invasive techniques, prolonged restraint, withholding food or water, or non-standard husbandry. Full copies of AUPs on the weekly list are available to IACUC members on a secure on-line repository. The OACU records receipt and reading of the weekly list by the IACUC members. IACUC members may request additional information or refer for full committee review any of the protocols on the weekly list within 48 hours. Assuming that a protocol is not referred for full committee review, the protocol is reviewed by DMR and written notification of approval is forwarded to the PI. However, any subsequent request by a member for full committee review will also be honored. Hence, the outcomes of designated member review include approval, requirement for modifications to secure approval, or referral to the full committee for review. Designated member review may not result in withholding of approval.

Minor modifications and annual renewals of approved protocols are submitted to the OACU using a web-based tool. The modification/renewal is reviewed and electronically signed-off by the VR. Minor modifications and annual renewals are then put on the weekly list for notification of all committee members. All members have the opportunity to review the modification and request full committee review of the entire proposal or proposed modifications. After 48 hours, with no call for further review, the minor modification is reviewed by DMR and a letter of approval of the minor modification(s) is sent to the principal investigator.

A list of all AUPs, modifications, and annual reviews that have been submitted to the committee since the last convened meeting, is provided as an agenda component for the next scheduled monthly meeting. The committee has the authority to reexamine proposals and, if appropriate, suspend the previous approval and conduct a full committee review to re-evaluate the approval status. The committee can suspend an activity that it previously approved if it determines that the activity is not being conducted in accordance with the Animal Welfare Act, the Public Health Service Policy, or the Institutional Assurance. The committee may suspend a previously approved activity only after review of the matter at a convened meeting of a quorum of the committee and with a vote for suspension by a majority of a quorum. The Institutional Official, in consultation with the committee and the Director of Animal Care and Use, will review the reasons for the suspension. If the activity involves PHS funding, the Director of Animal Care and Use will report committee findings to OLAW and, as appropriate, the USDA.

Full committee meetings are held monthly. All official business requires a convened quorum. Members who have any real or perceived conflict of interest in a research protocol or other matters requiring a vote do not participate in the review or approval process other than to provide information as requested by the IACUC. A member who has recused him/herself from voting may not contribute to the quorum. All "C" protocols, all multiple major surgery protocols, all protocols with departures from provisions of the *Guide*, and any referred "A" or "B" protocol are reviewed by the full committee. The VR who signed-off on the AUP serves as the primary reviewer and presents protocols to the committee. PIs may be invited to provide additional information for particularly complex protocols but they are excused for deliberations and voting. Possible outcomes to the review of a protocol or significant changes to an existing protocol are as follows: approval, modifications required to secure approval, withhold approval, or defer review. A majority vote of the convened quorum is required to approve, require modifications to secure approval, withhold approval, and suspend.

When modification is needed to secure approval, the UGA IACUC elects to have all IACUC members agree in advance in writing that the quorum of members present at a convened meeting may decide to use designated member review (DMR) subsequent to full committee review (FCR). The IACUC-approved SOP outlining the process for executing DMR following FCR establishes the IACUC's written concurrence that the quorum of members present at a convened meeting may decide to use DMR subsequent to FCR. This SOP is kept on file in the Office of Animal Care and Use. Once this process is initiated following FCR, the IACUC Coordinator forwards the modifications needed to secure approval to the PI by email, along with any necessary explanation. The designated member reviewers are assigned by the IACUC Chair. Designated member reviewers will review the proposed modifications in a shared electronic document and reply to the DMR group and IACUC Coordinator if the revision adequately addresses the issues and votes to approve, or if further details or clarification is needed. Once the DMR unanimously approves the AUP, the IACUC

Chair signs-off for his official approval and the decision is considered final. However, any member of the IACUC may, at any time, request to see the revised protocol and/or request FCR of the protocol. Failure to obtain unanimous DMR approval results in the modified protocol being returned to the full committee for consideration. Outcomes of this process are recorded in the IACUC minutes. Written notification of failure to approve an AUP is provided to the PI, along with a rationale for non-approval and changes or additional information required for resubmission and reconsideration as set forth in the PHS Policy at IV.C.4. Consultants are used as appropriate to help resolve special concerns. If changes or additional information is required before review and consideration for approval, the investigator will be contacted by in writing via email and informed of the changes or additional information needed. If the investigator declines to make recommended changes or provide additional information, the committee will be informed as such at a duly constituted meeting and the AUP will remain unapproved.

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

Significant changes to an approved AUP must be reviewed and approved by the IACUC before the changes are employed. Review and approval of proposed significant changes complies with the same requirements as review and approval of new protocols as set forth in the PHS Policy IV.C. Significant changes include, but are not limited to, change in the objectives of a project; cumulative increase in the number of animals by 10% or more of the originally approved number; adding or changing the species; substituting a new Principal Investigator; addition of surgical procedures or number of surgical procedures, or change from non-survival to survival surgery; withholding of analgesics; increasing invasiveness of procedures; changing animal care methods; change in the duration, frequency or numbers of procedures performed on an animal which may increase the potential for pain or distress experienced by the animal; using different methods of euthanasia that are not approved in the AVMA Guidelines for the Euthanasia of Animals; change in animal housing from group housing to single housing; or changes that affect personnel safety. Depending on the extent of the changes, submission of a complete new proposal may be required. All significant changes are reviewed and are subject to further review at any time in the same manner as the original proposal. Significant changes may not require the same level of review that the original AUP required; the VR determines the Use Category of each proposed significant change, and the level of review is assigned accordingly.

The IACUC notifies investigators, Veterinarian Reviewer, and URAR managers and supervisors in writing of its decision to approve or withhold approval of modifications. The Office of Sponsored Programs has access to the IACUC database of approved protocols. The IACUC provides written notification of failure to approve along with a rationale for non-approval and changes or additional information required for resubmission and reconsideration. The investigator may respond in person or in writing. IACUC Policy regarding significant changes to an approved protocol is posted on the IACUC website.

There are also certain modifications that can be handled simply in consultation with an IACUC-designated veterinarian through a Veterinary Verification and Certification (VVC) process. The Veterinary Reviewers that handle all other protocols and modifications are the designated veterinarians, and determine at their discretion which modifications meet the criteria for this level of review. The criteria are: changes in anesthesia, analgesia, sedation, or experimental substances; changes in euthanasia techniques to any method approved in the AVMA Guidelines for the Euthanasia of Animals; and changes in the duration, frequency, type, or number of procedures performed on an animal which do not increase the potential for pain or distress experienced by the animal. A policy with evaluation criteria has been created and approved by the IACUC and the VVC process is documented in the record of the modified protocol.

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

The IACUC notifies investigators, the Office of Sponsored Programs, and the directors of animal resources in writing via email of its decision to approve or withhold approval of an AUP or of modifications required to secure approval. The IACUC provides written notification of failure to approve along with a rationale for non-approval and changes or additional information required for resubmission and reconsideration. The investigator may respond in person or in writing. The letters are formatted to enable effective communication of approval and institutional compliance to granting agencies. Copies of the approval letters and all other official communications with the PI are maintained in a secure online repository by the OACU.

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

Committee members may review ongoing activities under approved AUPs at any time, and accordingly may request further review and reconsideration by the committee. Approved proposals are reviewed annually by a Veterinarian Reviewer, acting as a DMR as described in Part III.D.6., and facilitated by the IACUC Coordinator. A reminder that annual review is due is sent automatically via email to each investigator 90, 60, 30, and 10 days prior to the anniversary date of initial approval. Once submitted, the annual review form is reviewed by the VR. Once the VR completes his/her review, it is sent to the IACUC Coordinator for further processing. The protocols up for annual renewal are then put up for review on the weekly list for approval by the IACUC using the process described above for new protocols. This process is also used to confirm that the approved activities are ongoing, if approval should be extended, if animal usage is within the approved parameters, and to confirm that there are no significant changes in procedures used by the investigator. Annual renewals must be approved by the 1st and 2nd anniversary of initial approval or the animal use proposal is terminated and a new complete proposal must be submitted for review.

All approved AUPs expire on the 3rd anniversary of initial approval. Animal work may not continue past the 3 year expiration date even if IACUC review is pending. Investigators are automatically notified of impending protocol expiration via email 90, 60, 30, and 10 days prior to the 3rd anniversary of initial approval. Investigators are notified that a complete new proposal must be submitted for review and approval using the same procedures as used for the initial submission. IACUC approval of newly submitted protocols is required for ongoing activities to proceed once the original protocol has expired.

Post-approval monitoring is performed on an ongoing basis using a variety of mechanisms. These mechanisms include the following: continuing protocol review; semi-annual laboratory inspections (conducted either during regular facilities inspections or separately) including examination of surgical areas, including anesthetic equipment, use of appropriate aseptic technique, and handling and use of controlled substances; review of protocol-related health and safety issues by the Research Safety and Health Review Committee; risk-based veterinary or IACUC observation of selected procedures; observation of animals by animal care, veterinary, and IACUC staff and members for adverse or unexpected experimental outcomes affecting the animals; observation made during training by the IACUC Training Coordinator of laboratory practices and procedures and comparison with approved protocols ; and external regulatory inspections and assessments.

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

In accord with PHS Policy IV.C.6, the IACUC may suspend an activity that it previously approved if it determines that the activity is not being conducted in accordance with applicable provisions of the Animal Welfare Act, the Guide, the institution's Assurance, or the PHS Policy. The IACUC may suspend an activity only after review of the matter at a convened meeting of a quorum of the IACUC and with the suspension vote of a majority of the quorum present. If the IACUC suspends an activity involving animals, the Institutional Official, in consultation with the IACUC, shall review the reasons for suspension, take appropriate corrective action, and report that action with a full explanation to OLAW, APHIS, and any federal agency funding that activity. In extreme circumstances where there is an immediate threat to animal or human health and well-being, the IACUC Chair also has the authority to halt an ongoing study until the IACUC can convene to review the situation and conduct official business.

- E. The risk-based occupational health and safety program for personnel working in laboratory animal facilities and personnel who have frequent contact with animals is as follows:

An Occupational Health and Safety Program (OHSP) has been developed for personnel who work in animal facilities and have exposure to animals. The goal of the OHSP is to prevent occupational injury and illness by avoiding, controlling or eliminating hazards in the workplace. The level and extent of participation by personnel in the OHSP is based on a risk assessment completed by institutional personnel and contracted occupational medicine professionals. The OHSP provides for application of elements appropriate for the species of animals used, the etiologic agents involved, host factors of the employees, and facilities and equipment at the work sites. The OHSP is designed using the NRC publication, *Occupational Health and Safety in the Care and Use of Research Animals*, as a reference.

There are three principal groups that provide oversight, guidance, and training for the use of hazardous agents on the UGA campus. The Office of Research Safety (ORS) is responsible for activities involving the use of hazardous materials and radiation. The University Office of Biosafety (OBS) is responsible for the use of recombinant DNA, toxins, and microbiologic hazards. Environmental Safety Division's (ESD) Occupational Health unit is responsible for industrial hygiene and general occupational health oversight.

The shared purview of the ESD and the ORS is assessing the risk and minimizing injury and illness associated with radiation, chemicals, other hazardous materials, and laboratory practices. Their activities include protocol review; inspection of facilities; permitting and other compliance functions; consultation with investigators; training of faculty staff and students; maintaining liaison with compliance and regulatory bodies; and occupational safety surveillance.

Minimizing the risks of injury and illness associated with biohazardous research is the goal of the OBS program. Biosafety is a cooperative effort of the Institutional Biosafety Committee (IBC), the Biosafety Officer (BSO), investigators, and laboratory staff. The Biosafety Officer, in conjunction with the IBC and program staff, reviews proposed research involving recombinant DNA techniques and other biohazards (i.e., infectious or venomous agents); consults with researchers on biosafety procedures; trains faculty, staff, and students involved in biohazardous research to obtain compliance with appropriate rules; maintains liaison with biosafety personnel at state and federal agencies, industries, and other universities; inspects laboratories and facilities; and does surveillance of laboratory accidents involving biohazardous agents.

Hazards related specifically with an animal research protocol are identified in the Animal Use Protocol and require review by the Biosafety Program, ORS, and/or the ESD. The ESD's industrial hygienist is a member of the IACUC.

All personnel with animal contact must enroll in the Occupational Health and Safety program. An Occupational Health and Safety questionnaire is distributed to all investigators with active animal use protocols and their staff members as well as animal care personnel. Personnel who have frequent or substantial contact with animals are required to participate in the program and complete the questionnaire. This includes the animal care personnel and researchers working with ABSL-3 agents, BSL-3Ag agents, and rabies. For personnel who do not have frequent or substantial contact with animals, enrollment in the OHSP of all personnel involved in a particular study is required for approval of AUPs. However, personnel who do not have frequent or substantial contact with animals may decline to participate; they must sign a waiver that provides informed consent if they choose to decline.

The questionnaire is the fundamental part of risk assessing employees with research animal contact. This Occupational Health and Safety questionnaire is reviewed as part of the risk assessment process by contracted occupational medicine physicians in consultation with the OACU. The risk assessment includes hazards posed by the animals and materials used; animal exposure intensity, duration, and frequency; susceptibility of personnel; and history of occupational illness and injury in the workplace. Annually, a follow up questionnaire is emailed to all program participants to provide updates on exposure to new species or hazards, or changes in medical status.

Other personnel (Facilities Maintenance Division, custodial staff, contractors, etc.) who may enter animal facilities but who do not have any animal contact are enrolled in a "noncontact" OHSP. This non-contact program consists of providing training materials about the health and safety risks inherent to animal facilities, then verifying they understand the risks and the means to mitigate them. Personnel entering high containment facilities complete a "noncontact" form specific to high containment facilities.

All animal care personnel before beginning work, whether full-time or part-time, are required to participate in a health evaluation including the documentation of a health history and a TB skin test. If tetanus immunization is not current, a booster is given. TB skin tests are repeated at least annually for those personnel working with non-human primates, *Mycobacterium tuberculosis*, vaccine strains of TB, or other Mycobacteria species. Pre-exposure rabies immunization is provided and rabies titers are repeated annually, for personnel at risk due to working with species that may be inadvertently infected. Personnel working with rabies infected animals have their titers checked every 6 months. Rabies booster vaccinations are provided if indicated by low titers. Tetanus immunization is kept up to date. Vaccination is provided for other agents on an as-needed basis with the consultation of health providers and the institutional Biosafety Program.

The use of hazardous biologic, chemical, and physical agents in animals is allowed only after a thorough review of both the nature and the scope of the experiment by the responsible users, Veterinarians, the UGA Biosafety Officer, ORS ESD personnel, and/or applicable oversight committees. All such experiments are conducted under the direction of a PI who is responsible for ensuring the safety of the operation and for following written policies for the use of such agents. All personnel, including laboratory and support staff, are required to receive orientation and training in many key areas prior to participating in experiments involving hazardous materials.

The UGA AUP form requests information on the use of biological, chemical, or radiation hazards. Biological hazards are assessed by the IBC. Radiologic hazards are assessed by the Radiation Safety Committee (RSC). General and chemical safety concerns identified in AUPs which do not fall within the purview of either the IBC or RSC are referred to the Research Safety and Health Review Committee (RSHRC). The IACUC and IBC share a close working relationship: the BSO serves on the IACUC and one of the Lab Animal Veterinarians serves on the IBC. Prior to submission of the AUP to the IACUC, a Lab Animal Veterinarian reviews the proposal and any research using hazardous agents is identified. The PI is contacted to review and confirm the necessary oversight requirements, ensure appropriate facilities are available, determine what sorts of personal protective equipment are needed, and establish SOPs. Before work commences, a meeting is held with animal care management and supervisors along with the PI and their staff to provide training and review the SOPs. The RSHRC provides expert advice about general and chemical occupational health and safety concerns. This activity enhances compliance committee function by assisting in project reviews where new hazards or uncertainty exists in research protocols not previously assessed. The RSHRC is responsible for reviewing occupational health and safety risks in research protocols and providing guidance to the IACUC and the IBC.

Review by the IBC, RSC, and/or RSHRC, as appropriate, is required for AUP approval. Additionally, approval of the related IBC protocol is required to secure AUP approval. The IACUC Coordinator confirms such approvals. Approval by these oversight groups is contingent upon the investigator adequately addressing a variety of safety issues, including appropriate work practices, administrative controls, PPE, and occupational medicine interventions.

Zoonosis surveillance is the primary responsibility of the Lab Animal Veterinarians through review of quality assurance data from quarantine, routine colony health monitoring, and animal health data provided by vendors. The Lab Animal Veterinarians are also informed of any exposures, potential exposures, or possible occupationally acquired illnesses. A serum banking program is in place for personnel working with BSL-3 agents or other agents which may require this level of surveillance. Procedures for reporting exposure and potential exposure to hazardous agents include: 1) reporting incident and possible occupationally acquired illnesses to immediate supervisors; 2) directing exposed personnel to our occupational health services group, for evaluation; 3) reporting exposure and potential exposure to ESD (i.e., exposure to a chemical substance) or the Office of Biosafety; and 4) an "Incident/Accident Report" is filed with ESD and a copy is maintained in the facility supervisor's files.

IACUC policy states that eating drinking, smoking and applying cosmetics is not permitted in any University animal rooms. Smoking is not allowed in any UGA buildings. The URAR facilities and PDRC have dedicated break areas for eating and drinking. Hand washing facilities are located throughout all animal facilities. Most animal rooms have hand washing sinks in them or in close proximity. Hand washing sinks are also located in procedure rooms and cage wash areas. All hand washing sinks are supplied with disinfectant soap and disposable paper towels. Hand sanitizer dispensers are located at all entry and exit points in all laboratory animal facilities. Changing facilities, locker rooms, and showers are available in or adjacent to the all the conventional laboratory animal facilities.

Hazardous agents are contained within the study environment and animal housing area through a combination of engineering controls, administrative controls, and PPE.

Engineering controls include facility and animal room construction. Specifics vary with the level of hazard risk, from sealed rooms with gasketed doors to standard animal holding rooms with impermeable and easily sanitized surfaces. Engineering controls also include biosafety cabinets and fume hoods, automatically locking doors, sanitation equipment, and HEPA filtered housing systems. Whenever possible, biological hazards are contained at the primary enclosure by using static microisolators or individually ventilated cages under negative pressure exhausted through HEPA filters. Negatively pressurized rooms and 100% fresh air/100% exhaust are engineering features used in animal housing areas to contain hazardous agents. All work with hazardous agents is performed in Class II BSCs. Rodent caging contaminated with hazardous biologic agents is bagged out of the housing area and autoclaved before disposal.

Administrative controls include institutional policies, facility access practices limit access to only those personnel required to conduct the work, SOPs, and training related to proper practices for working with hazards. Depending on the agent involved, practices may include all or some of the following: 1) posting of biohazard signage, 2) wearing protective attire, 3) changing animal caging under Class II Biological Safety Cabinets, 4) housing animals in filtered or negative pressure HEPA filter ventilated caging, 5) autoclaving exposed equipment and materials prior to cleaning, 6) decontamination of animal rooms following completion of studies, and 7) autoclaving exposed materials in biohazard containers prior to incineration or disposal.

Additionally, PPE is used to contain hazardous agents, by preventing contamination of personnel or their clothing. Animal care personnel are provided with and required to wear uniforms provided by the institution. Rubber boots, disposable dust/mist masks, vinyl or nitrile gloves, safety glasses or goggles, disposable lab coats, coveralls or shoe covers, hearing protection, and rain suits are provided and used when appropriate. Protective clothing worn in research animal environments is not to be worn outside of animal facilities. A clean lab coat is worn over protective clothing if personnel enter public spaces in areas contiguous with the animal facility.

When working with acidic cage cleaners, a face shield (visor) or safety goggles must be worn. Face shields, acid aprons, and respirators are available. Ear protection (plugs, ear muffs) is provided for use in noisy areas such as dog or pig housing areas. Ear protection and safety glasses are also provided for personnel working with tractors, mowers, chain saws, and trimmers. Signage is posted wherever hazardous agents or conditions are encountered. A variety of species appropriate equipment is used to minimize animal-related risks.

If specific protective apparel or equipment is required for a specific animal species or hazardous agent, it is provided to personnel, and training is provided on the handling of that species and use of special equipment prior to the initiation of the project. The Institutional Biosafety Committee in an approved Biosafety Protocol describes required equipment and procedures. Personal protective equipment provided depends entirely on the hazards encountered and may range from exam gloves, lab coat and a dust/mist mask to double layer Tyvek coveralls, full face respirator, boots, and double gloving. A respiratory protection program is in place for personnel who require protection of a fitted respirator or powered air purifying respirator (PAPR).

Training and education is a key component of the health and safety program for personnel potentially exposed to hazardous agents. The Veterinarians, PI, and health and safety professionals provide training and education on a case-by-case basis for the specific hazard. All new employees are required to participate in a New Employee Orientation program presented by the UGA. This informs the new employee of his/her "Right-to-Know" with regards to chemical hazards in the workplace. Training opportunities for staff involved with the use of hazardous agents in animals includes seminars given by the ORS, ESD and the OBS, web based activities, video libraries, and one-on-one consultation regarding specific practices.

The educational programs for occupational health and safety matters take several forms. The IACUC and Office of the Vice President for Research sponsor and conduct training programs using several formats. Programs are offered for the University community as well as more specific programs for animal care staff. The course "Staying Healthy While Working with Animals" is a requirement for all personnel working with animals in research. Topics covered in these training programs include zoonoses, personal hygiene, protective equipment, ergonomics, sharps, dangerous chemicals, laboratory animal allergies, and animal handling as well as special precautions for pregnancy, illness, and immune suppression.

Zoonotic disease risks are of special concern with primates. Currently, only new world monkeys are sometimes housed at UGA facilities. Animal care personnel and researchers working with primates are trained and cautioned on the dangers of working with nonhuman primates by the Attending Veterinarian and PI. Animal care personnel and researchers using primates are required to be TB skin tested at least annually, be immunized for measles, and wear protective clothing and facemasks. The URAR Facility Supervisor is responsible for insuring compliance by animal care staff. The PI is responsible for insuring compliance by their own research staff, although URAR staff members monitor compliance closely as well. A "bite/wound" first aid kit is located in the office immediately adjacent to the primate housing area. The kit includes an information sheet for physicians indicating risks associated with wounds and other zoonotic risks associated with new world monkeys. Bites and scratches for all species are treated immediately with referral to the Occupational Health Physician during business hours, or an emergency or primary care physician after business hours/weekends/holidays as needed.

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

The institution endorses, supports, and promotes training and instruction to all personnel involved in the care and use of research animals to ensure they are qualified to do so. The role of Training Coordinator is filled through the Office of Research Compliance to facilitate the development, delivery, and documentation of training for scientists, animal technicians, and other personnel involved in animal care, treatment, or use. Elements of the training program consist of required courses provided by the OACU, formal course work leading to certification, seminars, workshops, on-line modules through the AALAS Learning Library, informal meetings, one-on-one instruction, professional and graduate level curricula, and participation in national and regional symposia.

Training and continuing education of all animal care staff is encouraged and supported; a bonus program is funded by the OVPR for URAR staff who achieve certification and maintain a registered status through continuing education. AALAS certification of all eligible employees is a unit goal. All new employees are required to participate in a New Employee Orientation program presented by the UGA. This informs the new employee of his/her "Right-to-Know." In addition, all new employees are required to complete a mandatory "IACUC 101" online course that provides a review of applicable laws, regulations, and guidelines, as well as the University Policy on reporting concerns in animal care. Additional information provided in this course focuses on alternatives, the Three Rs, humane endpoints, and minimization of animal numbers while obtaining scientifically relevant results. The U.S. Government Principles, alternatives, methods to search for alternatives, and institutional format for submission of proposals to use animals are discussed. New employees must also complete the online "Staying Healthy While Working with Animals" course that informs them of occupational health risks inherent to working with research animals and the ways in which they can mitigate these risks. Both online courses must be completed before they have animal contact. All new employees must complete online training on "Hazardous Communication," "Personal Protective Equipment," "Back Safety," "Bloodborne Pathogens in Animal Research," "Working in Animal BSL1, BSL2 and BSL3," "Biosafety Cabinet and Change Station Operation" and "Cage Wash and Autoclave Safety" within 60 days of hire. They must receive documented training on the University Research Animal Resources Disaster Plan within 30 days of hire. Additionally, staff with responsibilities in high containment areas must complete online courses in "Concepts of Biosafety" and "Working with Laboratory Animals in Biocontainment" within the first 60 days of employment. New employees are also required to read and sign specific standard operating procedures for the animal species/housing type prior to working in the animal room itself. Technical training for animal care staff is managed by the supervisors and includes hands-on demonstrations and individualized instruction. New employees work one-on-one with the supervisor for one week then shadow a senior caretaker until the supervisor is assured they have mastered assigned tasks. Employees assigned to help Laboratory Animal Health Technicians perform more involved techniques, e.g., blood collecting and administering medication, receive specialized training when these duties are assigned. All part time students are trained by full time staff and are encouraged to attend onsite training sessions and seminars offered by the URAR; many have achieved AALAS certification. Currently, 26 are AALAS certified: eight at ALAT, seven at LAT, nine at LATG, and two at CMAR.

Continuing education is expected of all animal care staff. Staff are encouraged to customize their continuing education to match with their work responsibilities and their personal interest areas for professional growth. Staff must complete 15 hours of training per year. Mandatory training accounts for 10 hours every 3 years, as the courses required at hire must be repeated every 3 years. There is an "IACUC 101 Refresher" that can be taken as an update to "IACUC 101" credit. Otherwise, the remaining hours of the 15 per year can be customized by the employee. Training is

accepted using the standards and credits allowable by AALAS. Continuing education opportunities include branch and national AALAS meetings, and University sponsored programs, such as lectures, workshops and webinars. Vendors also provide valuable training on caging systems, operation for BSCs and change stations, operation of cleaning equipment, appropriate use of chemicals and PPE. All personnel are encouraged to participate in branch and national AALAS with memberships, travel and per diem provided by the Office of the Vice President for Research and the URAR.

As part of the institution's program for animal care and use, training/educational programs are provided to scientists, animal technicians, and other personnel involved in animal care, treatment, or use. Anyone listed on an Animal Use Protocol must also complete the mandatory online training courses "IACUC 101" and "Staying Healthy While Working with Animals". Completion of these training courses by all listed personnel is required prior to approval of any Animal Use Protocol. In addition, all animal research personnel must take "IACUC 101 Refresher" every 3 years and complete at least 1 additional documented hour of animal research-based continuing education every 3 years. The OACU regularly provides continuing education opportunities through lectures, workshops and hosted webinars. Reference materials and internet based materials are used adjunctively. Instructional videos and books are available from the OACU training library. Investigators can request specific hands-on training with the Research Compliance Training Coordinator. Other training involves animal use proposal development and review with the laboratory animal veterinary staff prior to IACUC review. During this process, a critical review of proposed techniques and the methods for handling, housing, and minimizing pain and distress is conducted. This includes the use of anesthetics, analgesics, and tranquilizers. The OACU website also features online detailed descriptions of appropriate techniques for common technical procedures involving the most commonly used research animal species.

The Laboratory Animal Veterinarians periodically present seminars to research faculty and graduate students. The seminars deal with a variety of relevant topics including compliance basics, the use of alternative research and testing methods to minimize the number of animals used for research, safe handling and humane considerations, animal health, anesthesia and analgesia, zoonotic diseases, occupational health, and biosafety guidelines.

Orientation sessions are conducted on an ongoing basis for faculty, visitors, and research personnel working with animals. Participation in the orientation sessions is required for access authorization to the facility. The sessions are conducted at the facility in which their animals are housed. The sessions, conducted by the Animal Facility Supervisors, cover husbandry procedures, veterinary medicine, PPE requirements, general occupational health and safety concerns, regulatory issues including discussion on the Guide, and instructions in special procedures for their research area.

Graduate course offerings and professional curriculum electives include a laboratory animal medicine course (POPH 5202) and wet lab (POPH 5203L), animal welfare (POPH 5215), and pathology of laboratory animals (VPAT 8320). A course periodically offered by the Psychology Department, PSYC 8330: Laboratory Apprenticeship in Biopsychology (Small Animal Surgery) is a required course for psychology graduate students. It is conducted by the Psychology faculty and Veterinarians. The course educates student in common surgical procedures conducted in the neurosciences as well as guidelines in aseptic techniques. All these courses may be audited by faculty, staff, and students.

Records of all required training are maintained by the Research Compliance Training Coordinator using an electronic database. Members of the IACUC receive orientation training, reference and web-based resources, and in-service training. The orientation consists of a one-on-one session with the Research Compliance Training Coordinator that reviews the laws, regulations, and guidelines regarding the use of animals in research; the roles and responsibilities of the IACUC; standard operating procedures for the IACUC; and a review of reference materials. Reference materials provided (electronically and hard-copy) for each IACUC member include the *Guide*, the *Animal Welfare Act Regulations*, the *Institutional Animal Care and Use Committee Guidebook*, the *Guide for the Care and Use of Agricultural Animals in Research and Teaching*, *Report of the AVMA*

Panel on Euthanasia, the PHS Policy on Humane Care and Use of Animals, and Occupational Health and Safety in the Care and Use of Research Animals. An IACUC resources web-site provides links to resources such as to the OLAW web site, a variety of web sites regarding alternatives, the USDA policies and Animal Care web site, and a variety of PDF documents, including the PHS Animal Welfare Assurance, NIH guidance documents on monoclonal antibody production and guidance documents from learned societies such as the American Society of Ichthyologists and Herpetologists Guidelines for the Use of Live Amphibians and Reptiles. In-service training and regulatory updates are provided at the monthly convened meetings and periodic IACUC retreats. The institution encourages and supports travel for IACUC members to national and regional meetings, such as SCAW's IACUC 101 and other IACUC-focused conferences.

IV. Institutional Program Evaluation and Accreditation

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

- (1) This Institution is Category 1 — accredited by the [Association for Assessment and Accreditation of Laboratory Animal Care International \(AAALAC\)](#) . As noted above, reports of the IACUC's semiannual evaluations (program reviews and facility inspections) will be made available upon request.

V. Recordkeeping Requirements

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

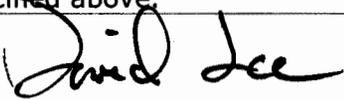
VI. Reporting Requirements

- A. The Institutional reporting period is the calendar year (January 1 – December 31). The IACUC, through the Institutional Official, will submit an annual report to OLAW by January 31 of each year. The annual report will include:
 - 1. Any change in the accreditation status of the Institution (e.g., if the Institution obtains accreditation by AAALAC or AAALAC accreditation is revoked)
 - 2. Any change in the description of the Institution's program for animal care and use as described in this Assurance
 - 3. Any change in the IACUC membership
 - 4. Notification of the dates that the IACUC conducted its semiannual evaluations of the Institution's program and facilities (including satellite facilities) and submitted the evaluations to the Institutional Official, Dr. David Lee.
 - 5. Any minority views filed by members of the IACUC

- B. The IACUC, through the Institutional Official, will promptly provide OLAW with a full explanation of the circumstances and actions taken with respect to:
 - 1. Any serious or continuing noncompliance with the PHS Policy
 - 2. Any serious deviations from the provisions of the *Guide*
 - 3. Any suspension of an activity by the IACUC

- C. Reports filed under VI.A. and VI.B. above should include any minority views filed by members of the IACUC.

VII. Institutional Endorsement and PHS Approval

A. Authorized Institutional Official	
Name: Dr. David Lee	
Title: Vice President for Research	
Name of Institution:	
Address: <i>(street, city, state, country, postal code)</i> 150B Paul D. Coverdell Center for Biomedical and Health Sciences The University of Georgia Athens, Ga 30602-7411	
Phone: 706.542.5969	Fax: 706.542.5978
E-mail: dclee@uga.edu	
Acting officially in an authorized capacity on behalf of this Institution and with an understanding of the Institution's responsibilities under this Assurance, I assure the humane care and use of animals as specified above.	
Signature: 	Date: 11/23/15

B. PHS Approving Official <i>(to be completed by OLAW)</i>	
Name/Title: Office of Laboratory Animal Welfare (OLAW) National Institutes of Health 6705 Rockledge Drive RKL1, Suite 360, MSC 7982 Bethesda, MD USA 20892-7982 (FedEx Zip Code 20817) Phone: +1 (301) 496-7163 Fax: +1 (301) 915-9465	
Signature:	Date:
Assurance Number:	
Effective Date:	Expiration Date:

VIII. Membership of the IACUC

Date: July 1, 2015			
Name of Institution: The University of Georgia			
Assurance Number: A3437-01			
IACUC Chairperson			
Name*: Gaylen L. Edwards			
Title*: Department Head		Degree/Credentials*: D.V.M., Ph.D	
Address*: Physiology and Pharmacology, College of Veterinary Medicine University of Georgia Athens, Ga 30602			
E-mail*: gedwards@uga.edu			
Phone*: 706-542-5854		Fax*: 706-542-3015	
IACUC Roster			
Name of Member or Code	Degree/ Credential	Position Title	PHS Policy Membership Requirements
<i>Gaylen Edwards</i>	<i>DVM, PhD</i>	<i>Department Head, Physiology & Pharmacology</i>	<i>IACUC Chair</i>
<i>1 Leanne Alworth</i>	<i>DVM, MS, DACLAM</i>	<i>Director, Animal Care and Use</i>	<i>Veterinarian</i>
<i>2</i>	<i>MA</i>	<i>Retired Librarian</i>	<i>Nonscientist, Nonaffiliated</i>
<i>3</i>	<i>PhD</i>	<i>Professor</i>	<i>Scientist</i>
<i>4</i>	<i>JD</i>	<i>Attorney</i>	<i>Nonscientist, Nonaffiliated</i>
<i>5</i>	<i>PhD</i>	<i>Associate Professor</i>	<i>Alternate Member for 20</i>
<i>6</i>	<i>BS</i>	<i>Director EHS Technical Services</i>	<i>Alternate Member for 14</i>
<i>7 Stephen Harvey</i>	<i>DVM, MS, DACLAM</i>	<i>Assistant Director – URAR</i>	<i>Veterinarian</i>
<i>8</i>	<i>DVM, PhD</i>	<i>Associate Professor</i>	<i>Scientist</i>
<i>9</i>	<i>PhD</i>	<i>Professor</i>	<i>Scientist</i>
<i>10</i>	<i>AS, RLAT</i>	<i>Lab Animal Tech</i>	<i>Member</i>
<i>11</i>	<i>BS, RLATG</i>	<i>Research Compliance Training Coordinator</i>	<i>Member</i>
<i>12 Christopher King</i>	<i>DVM, DACLAM</i>	<i>Associate VP for Research Compliance</i>	<i>Veterinarian</i>
<i>13</i>	<i>PhD, CIH, CSP</i>	<i>Industrial Hygiene and Occupational</i>	<i>Member</i>

		<i>Safety Manager</i>	
14	<i>PhD</i>	<i>Associate Professor</i>	<i>Scientist</i>
15	<i>PhD</i>	<i>Associate Professor</i>	<i>Scientist</i>
16	<i>PhD</i>	<i>Associate Professor</i>	<i>Alternate for Member 15</i>
17	<i>BS, LAT</i>	<i>Lab Animal Tech</i>	<i>Alternate for Member 10</i>
17	<i>BS, SM(NRCM)</i>	<i>Biosafety Manager</i>	<i>Alternate Member for 18</i>
18	<i>MS, RBP</i>	<i>Biosafety Officer</i>	<i>Member</i>
19	<i>BS, RALAT</i>	<i>IACUC Coordinator</i>	<i>Member</i>
20	<i>PhD</i>	<i>Professor</i>	<i>Scientist</i>

* This information is mandatory.

** Names of members, other than the chairperson and veterinarian, may be represented by a number or symbol in this submission to OLAW. Sufficient information to determine that all appointees are appropriately qualified must be provided and the identity of each member must be readily ascertainable by the institution and available to authorized OLAW or other PHS representatives upon request.

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

**** [PHS Policy](#) Membership Requirements:

Veterinarian veterinarian with training or experience in laboratory animal science and medicine or in the use of the species at the institution, who has direct or delegated program authority and responsibility for activities involving animals at the institution.

Scientist practicing scientist experienced in research involving animals.

Nonscientist member whose primary concerns are in a nonscientific area (e.g., ethicist, lawyer, member of the clergy).

Nonaffiliated individual who is not affiliated with the institution in any way other than as a member of the IACUC, and is not a member of the immediate family of a person who is affiliated with the institution. This member is expected to represent general community interests in the proper care and use of animals and should not be a laboratory animal user. A consulting veterinarian may not be considered nonaffiliated.

IX. Other Key Contacts (optional)

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

Contact #1
Name: Dr. Leanne Alworth
Title: Director, Office of Animal Care and Use

Phone: 706-542-5933	E-mail: alworth@uga.edu
Contact #2	
Name: Dr. Christopher King	
Title: Associate Vice President for Research Compliance	
Phone: 706-542-4016	E-mail: cking@uga.edu

X. Facility and Species Inventory

Date: July 1, 2015			
Name of Institution: The University of Georgia			
Assurance Number: A3437-01			
Laboratory, Unit, or Building*	Gross Square Feet [include service areas]	Species Housed [<i>use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog</i>]	Approximate Average Daily Inventory
A	5,599	Mouse	20
		Rat	40
B	2,175	Zebrafish	3,000
C	19,307	Mouse	11,000
		Zebrafish	12,000
D	6,846	Anole lizard	10
		Gerbil	12
		Guinea pig	3
		Mouse	900
		Rabbit	1
		Rat	20
		Xenopus frog	9
E	2,226	Rat	50
F	3,336	Mouse	260
		Rats	0
		Avian, misc.	10
G	12,213	Cat	4
		Dog	1
		Fish	1
		Gerbil	232

		Iguana	1
		Mouse	1,050
		Pig	2
		Rabbit	1
		Rat	120
		Turtle	1
H	18,249	Avian	33
		Cat	28
		Dog	46
		Ferret	12
		Mouse (Wild)	3
		Pig	4
		Rat	5
		Rat (Wild)	10
I	3,843	Cattle	1
		Goat	4
		Horse/Pony	1
		Pig	1
		Sheep	3
J	1,038	Mouse	6
		Guinea Pig	2
K	19,743	Chicken	40
		Ferret	16
		Guinea Pig	22
		Horse	8
		Marmoset	20
		Mice	53
		Pig	13
L	180 acres	Cattle	100
		Horse	35
M	31,661	Chicken	150
		Turkey	25
		Pigeon	18
N	436	Mouse	1
O	95	Fish	500