

University of Louisiana at Monroe
College of Pharmacy Animal Vivarium

Reporting and Investigating Animal Welfare Concerns

****Approved by ULM IACUC

REPORTING

All individuals using and caring for animals in the ULM Vivarium have the responsibility of safeguarding animal welfare. To that end, it is your responsibility to report events you believe cause inhumane treatment to ULM Vivarium animals to management. If you do not wish to remain anonymous, events believed to involve inhumane treatment to Vivarium animals can be reported to any of the following. If immediate action is required and you wish to report anonymously, report by phone but do not leave your name.

Role	Name	Email	Office Number	Office Phone
IACUC Chair	Dr. Keith Jackson	kjackson@ulm.edu	Bienville 370	342-1390
Facilities Manager	Mr. Coty Lee	colee@ulm.edu	Bienville 165	342-1701
Attending Vet.	Dr. Brent White	brentwhite467@gmail.com		323-4411

Alternately, if immediate action is not required, you may complete Part A of the form appended to this SOP and leave it with Mr. Lee in the Vivarium. If you wish to report anonymously, do not complete item 4-a in form.

INVESTIGATING

- Once management is informed of the event, an investigation will be conducted. If management finds animals moribund, using criteria of the OECD (Organization for Economic Cooperation and Development (OECD), 2000), the attending veterinarian will be consulted. Mr. Lee will be notified and animals will be euthanized. The principal investigator will be notified. If intervention procedures are thought feasible, the attending veterinarian will be consulted and, if necessary, will administer treatment at the site.
- If management and/or the attending veterinarian judge that inhumane treatment of Vivarium animals has occurred; the IACUC chair will be notified. If mishandling is severe, the IACUC chair will call a full IACUC meeting as soon as possible and the incident will be reviewed by a quorum of the IACUC. The principal investigator will be notified.
- If a majority of a quorum of IACUC members judges the activity as inhumane, corrective actions will be imposed or the animal use protocol accession number for that activity will be revoked. Reported concerns and corrective actions will be documented in the meeting minutes.
- The Institutional Official will be notified by memorandum from the IACUC chair of the issue, findings and corrective actions taken.
- If the person reporting the event did not do so anonymously, that individual will be informed of the outcome and corrective actions.

DISTRIBUTION

Reporting of this SOP will be posted in the entrance to the Vivarium animal housing area. The entire SOP will be included in an index binder of SOPs housed in shelving in the Vivarium conference room and will be posted on the College of Pharmacy Vivarium website.

REFERENCE

Organization for Economic Cooperation and Development (OECD), 2000. Guidance Document on the Recognition, Assessment, and Use of Clinical Signs as Humane Endpoints for Experimental Animals Used in Safety Evaluation. Environment Directorate. Paris. ENV/JM/MONO(2000)7.

University of Louisiana at Monroe
College of Pharmacy Animal Vivarium
Report for Suspected Animal Welfare Issues

A. Completed by Person Reporting Concern

- 1) Concern is: Animal Use or Protocol Husbandry Veterinary Care Occupational Health and Safety Other – explain: _____
 - 2) General Information:
Principal Investigator: _____ Date: _____
Protocol Number: _____ Species Involved: _____
Cage ID _____ #of Animals Involved: _____
 - 3) Location of Animals (Vivarium Room #): _____
 - 4) Briefly Describe Your Concerns: _____

- a. *OPTIONAL* Person Reporting Concern: _____

B. Completed by Person Investigating The Concern

Name: _____

Was there a negative impact on animal health? No Yes

Explain impact and actions taken: _____

Persons contacted to discuss the concern (list each individual separately):

- 1) Name: _____ Date: _____ Time: _____
- 2) Name: _____ Date: _____ Time: _____
- 3) Name: _____ Date: _____ Time: _____

Summarize the issues which were discussed with persons in item 4:

- 1) Person 1: _____
- 2) Person 2: _____
- 3) Person 3: _____

Describe corrective actions needed or performed: _____

Is there a protocol violation? No Yes If yes, describe: _____

Was a corrective action agreed upon: No Yes If yes, describe: _____

IACUC notification: Request for immediate subcommittee review and action For report at regular IACUC meeting

Veterinarian Signature: _____ Date: _____

C. Completed by IACUC Chair

Date Animal Care and Use Reporting Form received in IACUC Office: _____

Date of IACUC Review #1 _____ Action taken: _____

Date of IACUC Review #2 _____ Action taken: _____