Southeastern Louisiana University
Assurance number: A4604-01
Animal Welfare Assurance

I, Cheryl Hall, J.D., as named Institutional Official for animal care and use at Southeastern Louisiana University, 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, teaching, biological testing, and related activities involving live vertebrate animals supported by the PHS. 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: Southeastern Louisiana University: College of Science and Technology, College of Arts, Humanities and Social Sciences, College of Education, College of Nursing and Health Sciences. All covered components are physically located on the University’s Main Campus in Hammond, Louisiana. There are no off-campus satellite facilities and/or other covered components.

B. The following are other institution(s), or branches and components of another institution: None / Not Applicable.

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) 8th edition.

E. This Institution agrees to ensure that all performance sites engaged in activities involving live vertebrate animals under consortium (sub-award) 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:

**Southeastern Louisiana University**

Organizational chart for IACUC and veterinarian reporting

![Organizational chart]

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

1. **Name:** Dr. Dale Peyroux  
   **Qualifications:**  
   - Degrees: D.V.M., Louisiana State University School of Veterinary Medicine, 1980,  
   - Current President of the Louisiana Veterinary Medical Association,  
   - Past President of Florida Parishes Veterinary Medical Association,  
   - Training or experience in laboratory animal medicine or in the use of the species at the institution: Dr. Peyroux has experience with reptiles and amphibians, species used at the institution, and has served as the veterinarian for the institution for several years. Dr. Peyroux is involved in all animal health concerns and oversight of animal health aspects of the program.
**Authority:** Dr. Peyroux has direct program authority and responsibility for veterinary matters related to the Institution’s animal care and use program including access to all animals.

**Time contributed to program:** Dr. Peyroux practices locally and is a member of Southeastern’s IACUC. He spends approximately two hours per month at monthly meetings (or as needed) and semi-annual inspections of the facility and program. Additionally he responds to Veterinary Consult Request Forms submitted by Animal Users or Vivarium workers for animals requiring immediate veterinary attention. He submits his assessment via the Veterinary Consult Report Form.

2. **Name:** Dr. Lucy Senter,

   **Qualifications**
   - Degrees: D.V.M., Mississippi State University, 1986
   - Training or experience in laboratory animal medicine or in the use of the species at the institution: Diplomate, American College of Laboratory Animal Medicine, 1990; Director, Laboratory Animal Resources and University Veterinarian, Mississippi State University

   **Responsibilities:** Backup Veterinarian/Consultant

   **Time contributed to program:** As required (always on call).

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 five members, and its membership meets the composition requirements of PHS Policy IV.A.3.b. Part VIII 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 six 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:**

   - The IACUC conducts semi-annual reviews of the Animal Care and Use Program and Facilities, usually in May/June and in December of each year, at a meeting convened primarily for that purpose.

   - A revised Program Review and Facility Inspection Checklist based on that currently recommended by OLAW, is discussed and completed by all members of the IACUC in attendance, as a group. While all IACUC members are encouraged to attend, at least two members in attendance is required, with “The Guide” as a basis for evaluation.

   - The program review portion of the checklist includes sections regarding:

     - **Institutional Policies and Responsibilities**
       - Animal Care and Use Program
       - Disaster Planning and Emergency Preparedness
       - IACUC Protocol Review-Special Considerations
- IACUC Membership and Functions
- IACUC Training
- IACUC Records and Reporting Requirements
- Veterinary Care
- Personnel Qualifications and Training
- Occupational Health and Safety of Personnel
- Personnel Security
- Investigating and Reporting Animal Welfare Concerns

**Veterinary Care**
- Clinical Care and Management
- Animal Procurement & Transportation
- Preventative Medicine
- Surgery
- Pain & Distress
- Anesthesia and Analgesia
- Euthanasia
- Drug Storage and Control

**Summary Report Table**

- The members of the IACUC review all aspects of the University’s animal care and use program.

- If program deficiencies are noted during the review, they are categorized as significant or minor, and the committee develops a reasonable and specific plan and schedule for correcting each deficiency. The IACUC classifies a significant deficiency as one that may be a threat to the health and safety of the animals or personnel.

- No member of the IACUC who wishes to participate in any portion of the program review is involuntarily precluded from doing so.

2. **Inspect at least once every six 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 conducts semi-annual reviews of the Animal Care and Use Program and Facilities, usually in May/June and in December of each year, at a meeting convened primarily for that purpose.

- A revised Program Review and Facility Inspection Checklist based on that currently recommended by OLAW, is discussed and completed by all members of the IACUC in attendance, as a group. While all IACUC members are encouraged to attend, at least two members in attendance is required, with “The Guide” as a basis for evaluation.
The facility inspection portion of the checklist includes sections regarding:

- **Terrestrial Animal Housing and Support Areas**
  - Location and Construction
  - Room / Cage / Primary Enclosure
  - Environmental Enrichment
  - Behavioral and Social Management
  - Sheltered Outdoor Housing
  - Naturalistic Environments
  - Food and Water
  - Bedding and Nesting Materials
  - Sanitation
  - Waste Disposal
  - Pest Control
  - Emergency, Weekend, and Holiday Animal Care
  - Identification
  - Recordkeeping
  - Breeding Genetics and Nomenclature
  - Storage
  - Personnel
  - Room Locations and Notes on each room

- **Aquatic Animal Housing and Support Areas**
  - Location and Construction
  - Water Quality
  - Life Support System
  - Temperature, Humidity and Ventilation/Illumination/Noise and Vibration
  - Primary Enclosure
  - Environmental Enrichment
  - Social Housing, Behavioral and Social Management
  - Food
  - Substrate, Sanitation, Cleaning, and Disinfection, Waste Disposal
  - Pest Control
  - Emergency, Weekend and Holiday Animal Care
  - Identification
  - Recordkeeping
  - Storage
  - Personnel

- **Cagewash**
  - Construction and Operation

- **Aseptic Surgery**

- **Special Facilities**
  - Procedure Areas
  - Non-survival Surgeries
  - Laboratories
  - Rodent Surgeries
  - Imaging
- Whole Body Irradiation
- Hazardous Agent Containment
- Behavioral Studies

**Summary Report Table**

- The members of the IACUC inspect all animal facilities including all animal surgery areas, animal procedure rooms and rooms and areas of the vivarium.

- If deficiencies are noted during the inspection, they are categorized as significant or minor, and the committee develops a reasonable and specific plan and schedule for correcting each deficiency. The IACUC classifies a significant deficiency as one that may be a threat to the health and safety of the animals or personnel.

- No member of the IACUC who wishes to participate in any portion of the inspection is involuntarily precluded from doing so.

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:

   A semi-annual report to the IO (including Program and Facility Review Checklist, any noted new deficiencies, and progress made in remediation of prior deficiencies noted on the previous Semi-Annual Report to the IO) is written and assembled by the chairperson of the IACUC and submitted to all IACUC members by electronic mail for review and approval.

   - The reports contain a description of the nature and extent of the institutions adherence to the Guide and PHS Policy

   - The reports identify specifically any IACUC approved departures from provisions of the Guide and PHS policy, and state the reasons for each departure. If there are no departures the report so states.

   - Approved departures must be approved as part of a protocol, protocol amendment, or other written document, using either FCR or DMR as delineated below in Section III.D.6

   - Departures from the provisions of the Guide that are not IACUC approved are considered deficiencies and addressed as such, i.e., the IACUC develops a reasonable plan and schedule for discontinuing the departure, or having the departure properly reviewed and approved.

   - The report and checklist distinguish significant from minor deficiencies and includes a reasonable and specific plan and schedule for correction of all deficiencies.

   - If some or all of the institutions facilities are accredited by AAALAC International, the reports will identify those facilities as such.
● IACUC members are given the opportunity to provide minority views, which are included in the report. If there are no minority views, the report will so state. Signatures (with dates) are obtained in person.

● Following completion of the evaluations the completed report is electronically submitted to the IO in a timely manner.

● Copies of the reports are stored electronically on the University Y Drive (or Dropbox, Google Drive, or Microsoft OneDrive in the future), and as a hard signed copy in the Office of the IO (Office of Sponsored Research and Programs).

● Deficiencies are readdressed at subsequent IACUC meetings to assure that they are tracked and remediated in a timely manner.

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

● Southeastern Louisiana University’s Animal Resources and Care (ARAC) Policies and Standard Operating Procedures outline “Procedures for Reporting Animal Welfare Concerns” as follows:

1. Purpose
   In accord with federal law (Code 9 of Federal Regulations Part 2 Regulations, Subpart C, 2.32 c (4)) on this matter, the University must provide a system whereby employees can report concerns about perceived or suspected deviations from animal welfare laws and regulations, or from University policies and standards.

   Employees doing so are assured that:

   a. they can report their concerns without fear of reprisal,
   b. their concerns will be promptly and fairly investigated, and
   c. they will be informed of the outcome of the investigation.

2. Responsibility
   Any employee concerned that a possible violation of animal welfare policy has occurred should complete part 2 of the enclosed form. Concerns may include perceived problems, deviations, or deficiencies regarding animal housing, care, or use at Southeastern Louisiana University facilities.

3. How to Report
   Item 2 of the Employee Concern Action Form (ECAF) should be filled out by the concerned employee, whose name should be known by the chairperson of the Institutional Animal Care and Use Committee (IACUC). The ECAF is given to the chairperson of the IACUC (currently Dr. Penny Shockett). If the IACUC chairperson is not available, the ECAF should be given to the veterinarian serving on the IACUC (currently Dr. Peyroux) or
the PHS recognized Institutional Official (IO) (currently, Cheryl Hall, JD, Director, Office of Sponsored Research and Programs).

4. **Initiation of Investigation**
   After the chairperson of the IACUC has received and reviewed the submitted ECAF, he/she will remove the name of the person reporting the concern and other personal information before relaying the information. If the submitted ECAF is not clear or complete, the chairperson will interview the concerned employee to obtain additional information. Within 3 working days after receipt of the ECAF, the chairperson will complete and send a copy of the ECAF to the University appointed veterinarian.

   The veterinarian and the IACUC chairperson are normally responsible for investigating the report; however, these individuals may decide to have someone else lead the investigation (normally someone not involved in the allegation).

5. **Resolution of Investigation**
   Other items on the ECAF will be completed by the chairperson, IACUC, and by the attending veterinarian.

   - Individuals are informed of the procedures for reporting animal welfare concerns via the ECAF form in the SOPs and ARAC policies, which are part of the animal training program and located at the IACUC website. Additionally, these procedures are posted at the entrance to the Vivarium.
   - All reported concerns are brought to the attention of the full Committee.
   - If warranted, the IACUC chair convenes a meeting to discuss, investigate, and address any reported concern. If necessary, a reasonable and specific plan and schedule for addressing concerns is developed.
   - All reported concerns and all associated IACUC actions are recorded in the IACUC meeting minutes.
   - The IACUC routinely provides the IO with minutes of all meetings, semi-annual inspection reports, and notice of any facility, animal treatment or use concerns. All reports of animal treatment or use concerns are provided in writing to the IO and to OLAW as warranted, and may be made via meeting minutes, semiannual report of IACUC evaluations, or separate letter. Reports to OLAW are in writing through the IO. Initial reports to both the IO and OLAW may be made verbally.
   - As necessary, the IO and chair of the IACUC meet to discuss reports and the status of a variety of animal welfare issues and determine needed actions, as appropriate.
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 provides input in formulating recommendations to the IO.
- Recommendations by the IACUC to the Institutional Official are primarily made within the semi-annual program review and facility inspection reports to the IO, but may be made after non-review meetings.
- In matters involving immediate attention, the IO is notified by electronic mail or in person, by the Chairperson of the IACUC.
- All IACUC recommendations are reviewed and approved by the committee.

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:

- Animal Protocol Proposal Forms (fillable and downloadable from Southeastern’s IACUC website) are submitted electronically to the IACUC Chairperson, who calls a meeting to conduct proposal review.

- The IACUC chair often provides a quick prescreening of protocols to see if there are any major obvious deficiencies, before submitting the protocol for full review by the committee.

- The proposal is sent electronically to all IACUC members prior to the meeting and an electronic copy of the submitted proposal is saved on the University Y Drive (or Dropbox, Google Drive, or Microsoft OneDrive in the future). Any member may obtain, upon request, full-committee review of the proposed protocol.

- No member may participate in the IACUC review or approval of a protocol in which the member has a conflicting interest (e.g., is personally involved in the project) except to provide information requested by the IACUC; nor may a member who has a conflicting interest contribute to the constitution of a quorum. In the event that there is a conflict of interest regarding a proposal, for example if a member of the committee has submitted the proposal, that individual recuses him or herself from the review/approval process.

- The IACUC may invite consultants to assist in reviewing complex issues. Consultants may not approve or withhold approval of an activity or vote with the IACUC unless they are members of the IACUC.

- Meetings are conducted in person.
Any use of telecommunications is in accordance with NIH Notice NOT-OD-06 of March 24th, 2006, entitled Guidance on Use of Telecommunications for IACUC Meetings under the PHS Policy on Humane Care and Use of Laboratory Animals.

Full-Committee Review

- If FCR is requested, approval of those protocols may be granted only after review at a convened meeting of a quorum of the IACUC and with the approval vote of the majority of the quorum present.

- A minimum of >50% of voting members (not including those with protocols under review) is required for a quorum for Full Committee Review (FCR).

- At the meeting each proposal under review is discussed and any deficiencies involving practices not adhering to “The Guide” are noted.

- For the voting process, if there is no further discussion (and no deficiencies noted), approval of the protocol is moved, and seconded, and the protocol is approved. If there are significant deficiencies, withholding of protocol approval is moved, and seconded, and approval of the protocol is withheld.

- The possible outcomes of FCR are as follows:
  
  - Approval
  - Modifications Required to Secure Approval
  - Approval Withheld
  - (According to PHS Policy IV.C.)

- Review of Required Modifications Subsequent to FCR. When the IACUC requires modifications (to secure approval), of a protocol, such modifications are reviewed as follows:

  a. FCR following all applicable procedures as delineated in the PHS Policy and elsewhere in Part III.D.6 of this Assurance.

  OR

  b. Designated Member Review (DMR), if approved unanimously by all members at the meeting at which the required modifications are developed/delineated AND if all IACUC members have previously agreed in writing (e.g., documented a policy, filed in the office of the IO) that the quorum of members present at a convened meeting may decide by unanimous decision to use DMR subsequent to FCR when modification is needed to secure approval. However, any member of the IACUC may, at any time, request to see the revised protocol and/or request FCR of the protocol.)

  o If the IACUC uses DMR, the approval date is the date that the designated member(s) approve the study.
Minor modifications of an administrative nature, i.e., typographical or grammatical errors, required signatures, etc. may be confirmed by IACUC administrative/support personnel.

**Designated-Member Review**

- If FCR is not requested, at least one member of the IACUC, designated by the chairperson and qualified to conduct the review, may be assigned to review those protocols, and have authority to approve, require modifications (to secure approval), or request FCR of these protocols.

- Reports of polling of members to use DMR as well as the approval of protocols by DMR, are recorded in meeting minutes.

- Other members of the IACUC may provide the designated reviewer(s) with comments and/or suggestions for the reviewers consideration only. Concurrence to use the designated member review method may not be conditioned.

- After all required modifications are made, an identical copy of the final revised version of the protocol is provided to all designated reviewers for review and approval.

- If multiple designated reviewers are used, their decisions must be unanimous, and if not the protocol is referred for FCR.

- The possible outcomes of DMR are as follows:
  - Approval
  - Modifications Required to Secure Approval
  - Referral for FCR

  (According to PHS Policy IV.C.)

- Letters of approval of protocols approved by DMR are sent to proposer, all members of the IACUC, and the IO.

- No alternate processes or procedures for expedited review are used.

- In order to approve proposed protocols or proposed significant changes in ongoing protocols, the IACUC will conduct a review [by FCR or DMR] of those components related to the care and use of animals and determine that the proposed protocols are in accordance with the PHS Policy. In making this determination, the IACUC will confirm that the protocol will be conducted in accordance with the Animal Welfare Act insofar as it applies to the activity, and that the protocol is consistent with the Guide unless acceptable justification for a departure is presented. Further, the IACUC shall determine that the protocol conforms to the institution's PHS Assurance and meets the following requirements:
a. Procedures with animals will avoid or minimize discomfort, distress, and pain to the animals, consistent with sound research design.

b. Procedures that may cause more than momentary or slight pain or distress to the animals will be performed with appropriate sedation, analgesia, or anesthesia, unless the procedure is justified for scientific reasons in writing by the investigator.

c. Animals that would otherwise experience severe or chronic pain or distress that cannot be relieved will be painlessly killed at the end of the procedure or, if appropriate, during the procedure.

d. The living conditions of animals will be appropriate for their species and contribute to their health and comfort. The housing, feeding, and nonmedical care of the animals will be directed by a veterinarian or other scientist trained and experienced in the proper care, handling, and use of the species being maintained or studied.

e. Medical care for animals will be available and provided as necessary by a qualified veterinarian.

f. Personnel conducting procedures on the species being maintained or studied will be appropriately qualified and trained in those procedures.

g. Methods of euthanasia used will be consistent with the current American Veterinary Medical Association (AVMA) Guidelines for the Euthanasia of Animals unless a deviation is justified for scientific reasons in writing by the investigator.

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:

- All significant protocol changes whether in the form of an amendment (revision) or new protocol, will be handled in the same manner as new protocols. (See part III. D6 above)

- Examples of changes considered to be significant include, but are not limited to, changes:
  
  a. in the objectives of a study
  b. from non survival to survival surgery
  c. resulting in greater discomfort or in a greater degree of invasiveness
  d. in the species or in approximate number of animals used
  e. in Principal Investigator
  f. in anesthetic agent(s) or the use or withholding of analgesics
  g. in the method of euthanasia
  h. in the duration, frequency, or number of procedures performed on an animal
● For minor (not significant) changes to a protocol animal user may submit a Protocol Update / Amendment Form. This form is used when associated animal users change (e.g. students) or when a protocol undergoes a minor revision.

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:

   ● In instances of approval, the IACUC notifies investigators of decisions regarding protocol review by an official letter of approval (with protocol number indicated) signed and sent (with a copy of the approved protocol) electronically by the IACUC Chairperson on behalf of the IACUC.

   ● If the IACUC requires modifications of the protocol (to secure approval), it will include in its written notification, a list or description of the modifications required to secure approval.

   ● If the IACUC's decision is to withhold approval, it will include in its written notification a statement of the reasons for its decision and give the investigator an opportunity to respond in person or in writing.

   ● Copies of all IACUC decisions on protocols (and copies of approved protocols) are sent electronically to all members of the IACUC and the IO.

   ● A copy of the approved protocol and notification letter is forwarded to the Office of Sponsored Research, and stored electronically on the University Y Drive (or Dropbox, Google Drive, or Microsoft OneDrive in the future), and a hard copy of the signed, approved protocol is stored in a file in the Office of the IO (Office of Sponsored Research and Programs)

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:

   ● Post Approval Monitoring

      a. The IACUC conducts post approval monitoring during the Semi-Annual Review.

      b. Animals and facilities are also continuously monitored by animal care and use staff (Vivarium GA).

      c. Additionally, investigators are reminded annually to complete annual update forms (or revisions) if there will be minor (or significant) changes, respectively, to the protocol (e.g. students involved, number of animals used, etc). All
annual update forms (and revisions) must be approved by the IACUC and are recorded in the meeting minutes.

● There are currently no USDA Regulated Species used in the program. However, if USDA-regulated species are used, annual review of protocols will be conducted by a voting member or voting members of the IACUC.

● Protocols involving Non-USDA Regulated Species are approved for a maximum of 36 months and undergo de novo review every three years. Although annual updates (and revisions) are encouraged, no other periodic reviews other than the triennial de novo review is used.

● All protocols expire no later than the three year anniversary of the initial IACUC approval.

● If activities will continue beyond the expiration date, prior to expiration of the original or preceding protocol a new protocol must be submitted, reviewed, and approved as described in Part III.D.6. above. There are no provisions for exceptions or extensions.

● The Chairperson of the IACUC maintains an Excell spreadsheet documenting animal protocols submitted and approved, including protocol number, proposer, protocol name, and dates of approval and expiration.

● While the animal user is ultimately tasked with resubmitting revised protocols in a timely manner prior to expiration, the IACUC sends reminders to animal users as protocols are nearing expiration.

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:

● Southeastern's Guidelines for Individuals Using Vertebrate Animals for Research or Teaching state that the IO reserves the right to suspend any animal activities not complying with the Guide or institutional specified regulations of the IACUC. The IACUC reports such activities directly to the IO who may suspend animal activities.

The IACUC upon consultation among themselves and in the interest of animal welfare may suspend animal activities prior to notifying the IO, where such action is deemed necessary and prudent. This action will take place in a convened meeting with a majority vote of a quorum of the committee. In all cases the IO reports such suspensions to OLAW in a timely manner." (Also see Part VI. B.)

● 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 IV.C.1.a.-g. of 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, or any other institutional intervention results in the temporary or permanent suspension of an activity due to noncompliance with the Policy, Animal Welfare Act, the Guide, or the institution's Assurance, 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, in writing, to OLAW. Preliminary reports may be made verbally.

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:

1. Administration/management.

   ● The Director of Safety and Hazardous Materials Management is responsible for the overall management (development, implementation, monitoring, etc) of the Occupational Health and Safety Program for individuals involved in the care and/or use of laboratory animals.

   ● PIs are tasked with training students and employees working under their guidance in proper handling of hazardous materials, as well as personal hygiene, zoonosis, and any protective equipment related to the species involved.

   Dr. Robert Peltier serves as our Occupational Health and Safety Medical Officer and is the consulting physician at our Health Center.

2. Scope

   ● The program covers all personnel involved in laboratory animal care and/or use at The University. Participation in the program is mandatory.

   ● An electronic notification is made to all new employees, students, and faculty, that will potentially be working with animals, describing the requirement that they participate in the program and complete the animal training, which includes an online training and quiz, Health and Safety forms that must be completed, and Health History and Risk Assessment (being implemented).

3. Health Histories and Evaluations.

   ● Prior to working with animals, participants must complete a Health History and applicable individual Hazard Identification and Risk Assessment form evaluated by a licensed physician or nurse. Health and Safety, Health History/Risk Assessment, and release forms will be filed in the Student Health Clinic.

   ● To address individual health and safety concerns, Dr. Robert Peltier serves as our Occupational Health and Safety Medical Officer. Dr. Peltier is the consulting
physician at our Health Center and is always on call. He is responsible for answering medical questions/concerns, providing medical advice on minimizing health risks for animal users who need consultation, and reviewing the Health and Safety Program on a yearly basis.

- Additionally, training of individuals in possible health issues associated with animal use such as zoonoses, allergies, or precautions taken during pregnancy, illness or immune suppression, is accomplished in part by requiring that all animal users complete an Animal Health and Safety Agreement Form. Individuals with a history of allergies, asthma, pneumonia, active tuberculosis, recurrent bronchitis, chronic cough, chronic sneezing/runny nose, chronic itchy, irritated eyes, wheezing/shortness of breath, allergy-related skin rash, or any other health problems that might preclude working with animals is advised (on this form) to seek counseling by a health professional at Student Health, overseen by the Occupational Health and Safety Medical Officer, Dr. Robert Peltier. Appointments can be made by contacting the Vera W. Thomason Health Center on campus (985-549-2241).


- The Occupational Health and Safety Program is based on hazard identification and risk assessment.
- General hazard identification and risk assessment occurs via review of protocols by the IACUC and Director of Safety and Hazardous Materials Management, monitoring of the vivarium by a mechanical engineer, and semi-annual reviews of animal facilities by the IACUC.
- All protocols must be approved by the Director of Safety and Hazardous Materials Management.
- Hazards may include items such as chemical exposures, physical hazards, working with sharps, exposure to waste materials, animal bites, zoonoses, allergens, and respiratory, immunosuppression, and pregnancy concerns.
- Some common hazards related specifically to animal use in our program involve, allergies to mouse urine components, chemicals used in toxicology studies, and possibilities of snake bites.
- Hazards associated with the vivarium are reviewed during semi-annual reviews (e.g. tanks secured, electrical cords appropriate, lighting and AC functioning).
- Medical hazards to Animal users are identified during Animal User Health Histories/Hazard Identification/Risk Assessment, conducted and reviewed by a licensed medical professional under the guidance of the Occupational Health and Safety Medical Officer (currently being implemented). Animal users will be counseled on animal use based on these histories and reviews.

5 Procedures in Place to Alleviate Hazards and Minimize Risks.
• Health Histories and Evaluations:
  • Prior to working with animals, participants will be required to complete a health history questionnaire and applicable individual hazard identification and risk assessment form evaluated by a licensed medical professional. The health history forms will be completed and filed in the Student Health Clinic.

• Training:
  • All animal users must complete the animal training, which contains items and resources (e.g. SOPs and ARACS) pertaining to alleviation of hazards and minimization of risks, including procedures for emergencies, and the Snake Safety Guidelines for individuals working with snakes.
  
  • Students, faculty, or employees working with live vertebrate animals for research or teaching are required to read and sign an Animal User Health and Safety Agreement before participating in activities involving physical contact with live vertebrate animals or work in any of Southeastern’s animal housing facilities or laboratories in which animals are used.
  
  • The form is intended to inform personnel that there are adverse health risks such as allergies and zoonosis, associated with working with animals, particularly for pregnant women and individuals with allergies and respiratory conditions or compromised immune systems.

  • Also included are instructions for how to respond to and report an injury acquired while working with animals.

  • Animal users are informed that protection from animal allergens and zoonosis can be attained with proper use of an N-95 respirator, which will be available in the vivarium, with proper fitting provided by the Student Health Center.

• Approval of all protocols by the Director of the Safety and Hazardous Materials Management:
  • To address concerns related to hazard identification and risk assessment, chemical safety, physical hazards, handling of waste materials, and personal protective equipment, all animal protocols, prior to IACUC approval, are reviewed for approval by the Director of the Safety and Hazardous Materials Management Office. Comments and recommendations are used to alleviate hazards and minimize risks associated with particular protocols.

• Vivarium Safety and Protective Clothing
  • All individuals working with mice wear gloves, lab coats, and masks
  • Individuals working with toxic substances wear lab coats and gloves
  • Tanks are firmly secured
• Steam generator for cage sterilizer is routinely flushed and checked by a mechanical engineer. Steam generator is turned off immediately after use.
• No food or drink is allowed in the vivarium
• All animal waste from cages is removed immediately from vivarium after cage changes
• Snakes are kept in locked rooms and venomous snakes in locked housing, and all snake users are properly trained according to the Snake Safety Guidelines.

6. Immunizations.

• Tetanus vaccination at least every 10 years is recommended, and possibly more if cut, bit, or scratched by animals.

• Bloodborne pathogen training and Hepatitis B immunization are OSHA requirements for those who work with human blood or other potentially infectious material (blood products, body fluid tissues, human cell lines). It is recommended that animal users obtain this vaccine if they work with human blood, blood products, tissues, or cell lines

7. Precautions taken during pregnancy, illness, or decreased immunocompetence.

• Animal users are instructed that if they are planning to become pregnant, are pregnant, are ill, or have impaired immunocompetence that they should consult a health care professional/physician regarding such conditions and how they might pertain to their working with laboratory animals. If warranted, any work restrictions and/or accommodations are coordinated among the individual, his/her health care professional, human resources, etc.

• They are also referred to the Center for Disease Control website www.cdc.gov/ prior to working with animals

8. Provisions for personnel who are not involved in animal care and/or use but nevertheless need to enter areas when animals are housed or used.

• Janitorial and maintenance staff that enter the vivarium usually do not enter the animal rooms. All animals are in secured cages (or tanks), and snakes are in a locked room.

• In situations where housekeeping, maintenance, visitors, or other non-animal care and use personnel must access the animal rooms, they are briefed on appropriate precautions and provided any appropriate personal protective equipment and are then permitted in for a limited amount of time. A member of the animal care staff will be available for escort if needed. If there is extensive or prolonged work to be done the animals are removed prior to the individuals being allowed into the room.

9. Availability and procedures for treatment of bites, scratches, illness, or injury.
● In the event of bites, scratches, injury, or illness, depending on the severity, animal users must call the University Police and may be taken to the Student Health Center, or if severe the ER of the local hospital (North Oaks Regional Medical Center).

10. Procedures/program for reporting and tracking injuries and illnesses.

● In their training, animal users are instructed to report injuries (cuts, bites, scratches) or illnesses (for example, worsening animal-related allergies) first to the University Police and on an Animal Injury Report Form, which is available in animal holding room sink drawers and at Southeastern's IACUC website. Forms are submitted to the Director of the Office of Sponsored Research, where they are available for the Safety Officer or Health Professionals.

● The University complies with the state of Louisiana Office of Risk Management (ORM) assurance, which meets OSHA standards regarding the logging and reporting of workplace injuries and related illnesses. For employees, all accidents and incidents are filed with ORM. For students and visitors, University Police are notified and all accidents are investigated. University Police notifies the Safety Office, Physical Plant Services, and other offices on campus for investigation and analysis of the incident or accident. Injured individuals must first notify the University Police who file an official report. Academic departments maintain safety manuals that address safety issues including reporting accidents. Southeastern Louisiana University is audited every three years and must meet a compliance review annually on all programs including accident investigation, training, reporting, etc. A copy of the compliance and audit questions are available on the ORM website of the State of Louisiana (http://doa.louisiana.gov/orm/). The audit includes equipment safety, boating safety, driver safety, general safety, and bonds and crimes. The general safety portion addresses accidents and investigations. The total audit is over 200 questions. Southeastern has passed the audit with 96% or better for the last 5 years.

11. Other Pertinent Information Regarding the OH&S Program.

● Individuals working with snakes must do so in accordance with the Snake Safety Guidelines devised by Southeastern’s Snake Safety Committee and posted at the IACUC website.

● Specific requirements for care and use of snakes depend on the species involved and is handled on a case-by-case basis.

● Although the housing of venomous snakes has been minimal in recent years, the guidelines provide requirements and procedures for working with venomous snakes, including proper training and handling.

● All snakes are kept in locked rooms and venomous snakes are kept in locked enclosures. Venomous snakes are handled only by mechanical means, and procedures for responding to bites by venomous snakes are in place.
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 Part X, the 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:

1. IACUC Members

- IACUC members will complete the essentials for IACUC members curriculum at the AALAS website (www.aalaslearninglibrary.org) or CITI website (www.citiprogram.org).

- All IACUC members will also visit the OLAW website semi-annually and will familiarize themselves with pertinent modules and information as needed.

- IACUC members also have access to copies of the following:
  - the National Academy of Sciences Guide for Care and Use of Laboratory Animals (8th edition),
  - the ARENA/OLAW IACUC Guidebook, and
  - the PHS Policy on Humane Care and Use of Laboratory Animals.

- All members of the IACUC will be provided with a copy of this Assurance.

2. Animal Care and Use Personnel

- The animal assurance will be posted at the IACUC website and animal users will be notified of its location there.

- All PIs and instructors using animals for teaching or research are required to provide evidence of adequate experience and training in using the species involved. This information is provided in the Animal Protocol Proposal Form submitted to the IACUC.

- All individuals (PIs, Instructors, Students, Employees) using or caring for vertebrate animals are required to be familiar with the following:

  1. Southeastern’s Guidelines for Individuals Using Vertebrate Animals for Research or Teaching,
  2. The PHS Brochure: What Investigators Need to Know About the Use of Animals, and

These documents describe the humane practice of animal care and use, and include instruction on research or testing methods that minimize the number of animals required to obtain valid results and limit animal pain and distress.

- The Southeastern Guidelines specifically outline animal protocol approval procedures and animal training requirements.
All animal users must successfully complete an on-line Animal Training and Quiz based on these documents. Additionally, as stated in Southeastern’s Guidelines, the IACUC website contains additional guidelines and resources pertaining to particular species and other general information and resources, including the American Veterinary Medical Association Guidelines on Euthanasia (updated in 2013).

The training includes instruction on research or testing methods that minimize the numbers of animals required to obtain valid results and limit animal pain or distress as well as other requirements delineated in 9 CFR, Part 2, Subpart C, Section 2.32(c). Specifically, as applicable, training and instruction of personnel includes guidance in at least the following areas:

1. Humane methods of animal maintenance and experimentation, including:
   - The basic needs of each species of animal;
   - Proper handling and care for the various species of animals used by the facility;
   - Proper pre-procedural and post-procedural care of animals; and
   - Aseptic surgical methods and procedures;

2. The concept, availability, and use of research or testing methods that limit the use of animals or minimize animal distress;

3. Proper use of anesthetics, analgesics, and tranquilizers for any species of animals used by the facility;

4. Methods whereby deficiencies in animal care and treatment are reported, including deficiencies in animal care and treatment reported by any employee of the facility. No facility employee, Committee member, or laboratory personnel shall be discriminated against or be subject to any reprisal for reporting violations of any regulation or standards under the Act;

5. Utilization of services (e.g., National Agricultural Library, National Library of Medicine) available to provide information:
   - On appropriate methods of animal care and use;
   - On alternatives to the use of live animals in research;
   - That could prevent unintended and unnecessary duplication of research involving animals; and
   - Regarding the intent and requirements of the Animal Welfare Act and USDA-APHIS Regulations

IV. Institutional Program Evaluation and Accreditation

A. All of this Institution’s programs and facilities (including satellite facilities) for activities involving animals have been evaluated by the IACUC within the past six months and will be reevaluated by the IACUC at least once every six 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.

B. This Institution is Category 2 — not 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. The report of the most recent evaluations (program review and facility inspection) is attached.

V. Recordkeeping Requirements

A. This Institution will maintain for at least three 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, Cheryl Hall, J.D.

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 three 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, Cheryl Hall, J.D.

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.
### A. Authorized Institutional Official

<table>
<thead>
<tr>
<th>Name: Cheryl Hall, JD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title: Director Office of Sponsored Research and Programs</td>
</tr>
<tr>
<td>Name of Institution: Southeastern Louisiana University</td>
</tr>
<tr>
<td>Address: SLU 10508 Hammond, LA 70402</td>
</tr>
<tr>
<td>Phone: 985-549-5312 Fax: 985.549.5094</td>
</tr>
<tr>
<td>E-mail: <a href="mailto:chall@selu.edu">chall@selu.edu</a></td>
</tr>
</tbody>
</table>

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:** [Signature]

**Date:** 27 March 2014

### B. PHS Approving Official *(to be completed by OLAW)*

| 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) 915-9485 |

**Signature:**  
**Date:**

**Assurance Number:**

**Effective Date:**

**Expiration Date:**
### VIII Membership of the IACUC

**Date:** March 2014  
**Name of Institution:** Southeastern Louisiana University  
**Assurance Number:** A4604-01  

#### IACUC Chairperson

<table>
<thead>
<tr>
<th>Name*</th>
<th>Dr. Penny Shockett</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title*</td>
<td>Associate Professor, Department of Biological Sciences</td>
</tr>
<tr>
<td>Degree/Credentials*</td>
<td>Ph.D. Immunology/Biomedical Sciences</td>
</tr>
</tbody>
</table>
| Address* | Department of Biological Sciences  
Hammond, LA. 70402 |
| E-mail* | pshockett@selu.edu |
| Phone* | 985-549-3434 |
| Fax* | 985-549-3851 |

#### IACUC Roster

<table>
<thead>
<tr>
<th>Name of Member/Code**</th>
<th>Degree/Credentials</th>
<th>Position Title***</th>
<th>PHS Policy Membership Requirements</th>
</tr>
</thead>
</table>
| Dr. Roldan Valverde   | Ph.D. Endocrinology  
Associate Professor, Department of Biological Sciences | Scientist |
| Dr. William Robison   | Ph.D. History  
Professor and Head, Department of History and Political Sciences | Nonscientist |
| Dr. James Nelson      | M.D.  
Former Chief Medical Officer, North Oaks Regional Medical Ctr | Nonaffiliated |
| Dr. Dale Peyroux      | D.V.M.  
Veterinarian Hammond Animal Hospital | Veterinarian |
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.

[Note: all members must be appointed by the CEO (or individual with specific written delegation to appoint members) and must be voting members. Non-voting members and alternate members must be so identified.]

IX. Other Key Contacts (optional)

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

<table>
<thead>
<tr>
<th>Contact #1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: Dr. Christopher Beachy</td>
</tr>
<tr>
<td>Title: Facility Director</td>
</tr>
<tr>
<td>Phone: 985-549-3741</td>
</tr>
<tr>
<td>Contact #2</td>
</tr>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Title:</td>
</tr>
<tr>
<td>Phone:</td>
</tr>
</tbody>
</table>
X. Facility and Species Inventory

<table>
<thead>
<tr>
<th>Laboratory, Unit, or Building</th>
<th>Gross Square Feet [include service areas]</th>
<th>Species Housed [use common names, e.g., mouse, rat, rhesus, baboon, zebrafish, African clawed frog]</th>
<th>Approximate Average Daily Inventory#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vivarium</td>
<td>3000</td>
<td>Mice</td>
<td>200</td>
</tr>
<tr>
<td>Room 135 and 139</td>
<td></td>
<td>Turtles (Red-eared Slider)</td>
<td>200</td>
</tr>
<tr>
<td>Room 132 and 134</td>
<td></td>
<td>Black King Snake (Lampropeltis niger)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Banded Water Snake (Nerodia fasciatus)</td>
<td>5</td>
</tr>
<tr>
<td>Room 149</td>
<td></td>
<td>Mud Snake (Farancia abscura)</td>
<td>1</td>
</tr>
<tr>
<td>Room 136 and/or 150</td>
<td></td>
<td>Gray Rat Snake (Pantherophis Spilodes)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Southern Copperhead (Agkistrodon contortrix)</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Southern Cricket Frog (Acris gryllus)</td>
<td>360</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Green Treefrog (Hyla cinerea)</td>
<td>360</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Southern Toad (Anaxyrus terrestris)</td>
<td>360</td>
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<tr>
<td></td>
<td></td>
<td>Gulf Coast Toad (Incillius nebulifer)</td>
<td>360</td>
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<tr>
<td></td>
<td></td>
<td>Axolotl (Ambystoma mexicanum)</td>
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<tr>
<td></td>
<td></td>
<td>Southern Two-Lined Salamander (Eurycea cirrigera)</td>
<td>72</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dwarf Salamander (Eurycea quadridigitata)</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>Three-lined Salamander (Eurycea guttolineata)</td>
<td>72</td>
</tr>
</tbody>
</table>
Institutions may identify animal areas (buildings/rooms) by a number or symbol in this submission to OLAW. However, the name and location must be provided to OLAW upon request.

Unless otherwise indicated, mice and rats means mice of the genus *mus* and rats of the genus *rattus* that are purposely bred for research.

Numbers represent maximum daily inventory anticipated.