

## **Animal Welfare Assurance for Domestic Institutions**

I, George Kamberov, PhD as named Institutional Official for animal care and use at University of Alaska Anchorage, 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, DHHS, and/or NSF (if applicable). This Assurance covers only those facilities and components listed below.

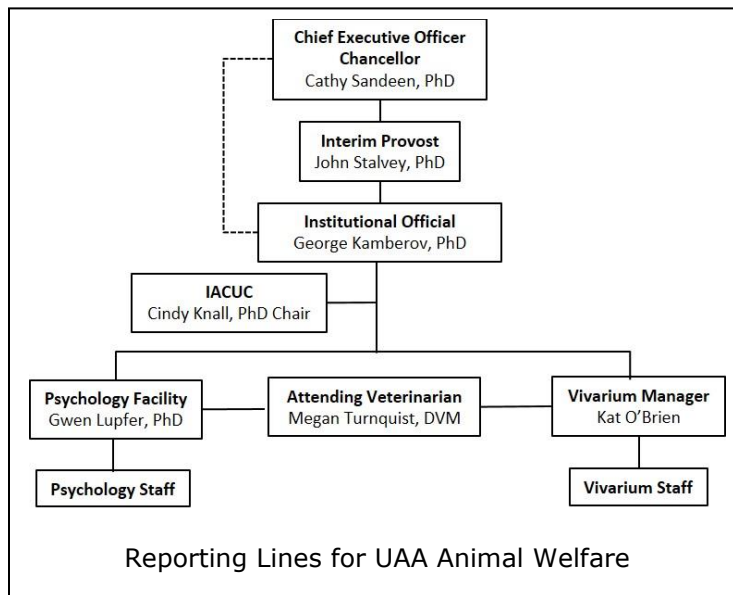
- A. The following are branches and components over which this Institution has legal authority, included are those that operate under a different name:
  - University of Alaska Anchorage: 3211 Providence Drive, Anchorage, AK 99508
  - Kodiak College: 117 Benny Benson Drive, Kodiak, AK 99615
  - Matanuska-Susitna College: 8295 E. College Dr., Palmer, Alaska 99645
  - Kenai Peninsula College, Kenai River Campus: 156 College Road, Soldotna, Alaska 99669
  - Kenai Peninsula College, Kachemak Bay Campus: 533 E. Pioneer Ave., Homer, AK 99603
  - Prince William Sound College: 303 Lowe St., P.O. Box 97, Valdez, Alaska 99686
- B. The following are other institution(s), or branches and components of another institution:  
No other institutions to use this Assurance.

### **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:



- 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. Megan Turnquist

#### Qualifications

- Degrees:  
Doctorate of Veterinary Medicine, Oregon State University, 2016
- Training or experience in laboratory animal medicine or in the use of the species at the institution:  
Training or experiences in laboratory Animal Medicine or in the use of the species at the institution: Worked for 3 years as a general practitioner in a small animal practice that includes rabbits, rodents, reptiles, and fish species. Previously published in American Journal of Veterinary Research as part of an investigation into the use of injectable antibiotics in cold-water teleosts. Prior to veterinary school, worked at a large-scale reptile breeding and educational facility for 5 years. Also worked as a veterinary assistant in a private practice that saw reptiles and small mammals/pocket pets. Recently begun working with falconry birds.

Authority: Dr. Turnquist has direct program authority and responsibility for the Institution's animal care and use program including access to all animals.

#### Time contributed to program:

As a consulting veterinarian, Dr. Turnquist allocates approximately 6 hours per month (4% of her time) to the animal care and use program.

- 2) Name: Jackie Frederickson (back-up veterinarian)

#### Qualifications

- Degrees:  
DVM, University of Minnesota, College of Veterinary Medicine 1979  
Veterinary Licensure #0172 State of Alaska

Licensed DVM in Minnesota and Wisconsin

- Training or experience in laboratory animal medicine or in the use of the species at the institution:

She has been a veterinarian for 36 years and has been working in Alaska for 34 years. Dr. Frederickson is a member of the AVMA, AKVMA, MNVMA, Association of Exotic Mammal Veterinarians (AEMV), Association of Reptile and Amphibian Veterinarians (ARAV), and Association of Avian Veterinarians (AAV). She served on the Mayor's Advisory Board for Anchorage Animal Care and Control for seven years (2000-2007). Dr. Frederickson is currently on the board of directors of PET Emergency Treatment, a 24-hour emergency veterinarian clinic. In addition, Dr. Frederickson is on the board of directors for the Alaska chapter of the Parrot Education and Adoption Center (AKPEAC). Her current workload at VCA Alaska Pet Care involves seeing dogs and cats (approximately 50% of her patients) and exotic animals (the remaining 50% of her patients are small mammals, reptiles, amphibians, & birds).

Responsibilities:

In the event Dr. Turnquist is unavailable through any means of communication, Dr. Frederickson will provide care and consultation on animal care and welfare matters and will have delegated program authority and responsibility for the Institution's animal care and use program including access to all animals.

Time contributed to program:

As needed basis.

- 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:
  - a. All members of the IACUC are given the opportunity to participate in the semi-annual program evaluation.
  - b. To review PHS Policy and the Animal Welfare Assurance to assure currency.
  - c. To review the IACUC membership to make sure that it complies with membership guidelines, and to review the various functions and procedures of the IACUC with the members.
  - d. To review record keeping and reporting functions to ensure that all procedures are being followed, and all protocols are up-to-date in their compliance.
  - e. To review the Veterinary Care Program, including the procedures for veterinary care and lines of authority, and to review any concerns over the administration of such care.
  - f. To advise committee members of available training options, and to conduct brief training exercises (shorts or discussion points), and to review the available training options for Researchers, teachers, and staff. To make recommendations for improvements in the training programs.
  - g. To review the policies and procedures in place for the Occupational Health and Safety Program (OHSP) to ensure the health and safety for personnel working with animals and to review the procedures for reporting concerns/health issues.
  - h. The Semiannual Program and Facility Review Checklist is used as a guide.
- 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:

- a. All members of the IACUC are given the opportunity to participate in the semi-annual inspection.
  - b. The Semiannual Program and Facility Review Checklist is used as a guide.
  - c. A visual inspection of the facilities is conducted by a subcommittee of the IACUC semiannually that includes the chair and at least one additional voting member. The general condition of the animals, their housing, animal density, their food, and their treatment with respect to research or teaching procedures are evaluated based on the Guide.
  - d. At each review, animal health and tracking records are reviewed.
  - e. Cage condition and cleaning procedures are reviewed, as are sanitation, waste disposal and pest control issues.
  - f. The physical parameters such as light intensity, air circulation, temperature, room volume, humidity, and all other factors that may affect the health or comfort of the animals are measured by the institution at least on an annual basis.
  - g. The report from the semiannual facility inspection is reviewed by the complete IACUC at the next meeting.
  - h. At the time of each semi-annual inspection, the IACUC sends a letter to the Director of all sites outside of Anchorage (listed in Part 1) to inform them that animals cannot be housed without prior approval from IACUC. The letter also requests verification that there are no animals being used at the remote sites. If a satellite facility wants to house animals, the IACUC will arrange for a site visit and inspection. Once approved, the facility will be inspected according to the procedures outlined above, regardless if animals are being housed at the time of the inspection. At this time, there are no animals housed at any site other than the Anchorage campus.
- 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 each semiannual meeting, the IACUC Chair prepares a report, using the Semiannual Report template provided by OLAW, for submittal to the Institutional Official. These reports include descriptions of any changes to the institution's program of animal care and use, nature and extent of adherence to PHS Policy, the *Guide* and the AWA, and any deficiencies in the program and/or facilities. . Any approved departures from the Guide or PHS Policy are also noted. Identification and approval of departures occur at regularly scheduled IACUC meetings, as follows. Should an IACUC member or Principal Investigator identify, within a protocol under review, any activity which is perceived as a potential departure, the quorum of IACUC members present consult the Guide, PHS Policy, the Attending Veterinarian and the scientific literature to determine whether the activity is a departure, and if so, whether it is in keeping with best practices and/or scientifically or medically justified and warrants approval by a majority vote of the quorum. If the IACUC finds any deficiencies within the animal care and use program or during a facility inspection, the deficiencies are designated as minor or significant, followed by a scheduled plan for correction. A majority of the IACUC members will sign the report as required by AWAR before it is sent to the Institutional Official. IACUC members in the minority are provided an opportunity to note minority views within the report before it is sent to the Institutional Official.
- 4) Review concerns involving the care and use of animals at the Institution. The IACUC procedures for reviewing concerns are as follows:
- a. The UAA IACUC Policy on Noncompliance Investigation Procedures is posted at each entrance to animal care facilities and is available on the UAA Research Integrity & Compliance website. The policy document contains instructions for reporting animal welfare concerns and identifies the persons to whom reports may be made.
  - b. Interested or concerned parties can submit reports regarding animal care and use or IACUC issues to any member of the committee, either anonymously or openly, in paper or via email. The informed committee member immediately reports all concerns to the IACUC Chair.
  - c. If not of a time-critical nature, the concern is discussed at the next scheduled IACUC meeting, and following discussion reported to the Institutional Official. If the concern

- indicates a serious problem which could require immediate action in order to protect animals or those humans involved in their care, the IACUC chair will call for immediate action by the veterinarian, and if necessary an emergency meeting of the IACUC to determine the corrective actions necessary.
- d. If corrective action is required, the offending faculty member in charge of the animals will be required to take the appropriate steps to correct the problems in a timely fashion. If such actions are not taken within the allotted time frame, the researcher's authority to work with animals will be suspended until such corrections are made, and the researcher can assure the IACUC that such violations will not be repeated.
  - e. To avoid reprisal against the reporting individual, the IACUC will hold the identity of reporting individuals in confidence (if known). The IACUC will also inform the involved researcher/faculty members that they are not to take any retaliatory action towards the reporter (if known). The reporter will be made aware that no reprisal should occur, and that if such action is taken, the incident will be reported to the Institutional Official for further action.
  - f. All reported concerns, and the IACUC's findings, will be detailed in the semi-annual report to the Institutional Official.
- 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:
- Written recommendations are included in the semiannual reports unless the situation warrants immediate action, in which case the proper authorities will be engaged immediately. Recommendations to the Institutional Official will include an explanation of the problem, an evaluation of the problem's seriousness, and suggestions for correction of the problem.
- 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:
- a. The IACUC will review all work that involves use of vertebrate animals, or tissues acquired from living vertebrate animals, in teaching or research, no matter the source of funding in support of that work. Researchers involved in such activities must complete a protocol review form that completely describes the proposed use of animals or their tissue. The protocol review form covers topics such as the numbers and types of animals to be used, the scientific justification for the use of animals, demonstration via literature review and text that the researcher has considered all alternative measures, and has selected the most appropriate species, numbers, and procedures (the 3 Rs), information on the housing and care of animals, information on the training and experience of all involved personnel, details on all procedures to be conducted on animals, methods to control physical or psychological distress, pain management methods, methods of euthanasia, time course for the acquisition and disposal of the animals, and a statement from the researcher or teacher indicating a working knowledge and willingness to adhere to the relevant principles within the Guide and to University Policy.
  - b. Completed protocol review forms and all supporting documentation, such as personnel training records, Standard Operating Procedures and government permits will be submitted electronically to the IACUC's protocol management system, IRBNet (<http://www.irbnet.org>).
  - c. Submitted protocols will be made available via IRBNet to all committee members prior to meetings where protocols will be reviewed by the IACUC. At a duly convened meeting of the IACUC with a quorum present, items on the approved agenda are individually summarized for and discussed by the membership present to insure all required elements specified under 9 CFR AWR 2.31.d and 2.31.e are represented and appropriately address within the protocol. At the meeting, the decision to approve, to require modifications (to secure approval) or to withhold approval will be made by a simple majority vote of the quorum present. Recommendations for modification will be made to the researcher in a timely manner. If the description of the animal activity is not clearly understandable by the general membership of the IACUC, advice from knowledgeable third party experts or additional information from the researcher will be obtained to assist in decision making.

- d. Approval of animal use proposals will be determined by a favorable vote of a majority of IACUC members representing a quorum of the IACUC. An IACUC member is not allowed to vote on their own proposal, but can provide advice to the committee.
  - e. Members of the IACUC will be asked at the beginning of each meeting to declare any real or perceived conflicts of interest related to the protocols to be reviewed at that meeting. In the event that a conflict exists, the member with a conflict will be asked to recuse themselves from the discussion of that protocol and abstain from voting on that protocol. The IACUC Chair with concurrence of the IACUC Coordinator insures that there are sufficient voting members present, at the beginning of the meeting, to maintain a quorum of voting members following the recusal of the conflicted member.
  - f. In the event that the IACUC votes to require modifications (to secure approval) with DMR following FCR, the IACUC Chair assigns the DMR following FCR to a voting IACUC member, generally the IACUC Chair themselves, based on the existing written, fully signed IACUC policy allowing DMR following FCR when modifications are needed to secure approval.
  - g. If a more timely review is necessary, the IACUC will conduct a designated member review. In this procedure, the researcher requests rapid review by the committee, the Chair reviews the proposal to see if designated member review is appropriate. If the Chair determines that designated review is appropriate, the proposal is made available to the entire committee with a request for the committee to provide a request for full committee review within forty-eight hours if a member does not agree with designated member review. If any committee member requests a full review, then the designated review is cancelled, and the proposal must undergo full review. If no one on the committee objects, then the Chair will designate a single reviewer for the proposal. This reviewer will make recommendations to the chair for approval, modifications required to secure approval, or refer the proposal back to the full committee for a full review.
- 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:
- Conduct a Full Committee Review or Designated Member Review to approve, require modifications in (to secure approval), or withhold approval of proposed significant changes regarding the use of animals in ongoing activities as set forth in the PHS Policy at IV.C. The IACUC procedures for reviewing proposed significant changes in ongoing research projects are similar to the initial proposal review. The principal investigator must provide sufficient information to the committee for the committee to ensure that the significant changes follow PHS policy and the Guide. The committee will again review species numbers and type, scientific justification, handling procedures, animal care, and personnel training and safety issues. Such reviews will take place during a scheduled meeting, or by designated review (the designated reviewer may approve, require modifications to secure approval, or refer the modifications back to the committee for full review).
- 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:
- a. Following each meeting in which protocols are reviewed, the UAA IACUC Coordinator will write within IRBNet a summary of the committee's decision. Within IRBNet, a letter is provided to the investigator indicating approval or require modifications in (to secure approval). If the committee requested additional information and/or required modifications in (to secure approval), the letter will include a list of details requested.
  - b. The institution is notified of the results of each protocol review through the Institutional Official's access to each protocol and its summary within IRBNet.
- 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:

- a. The IACUC approves the protocols for a period of three years, pending successful annual review. In the review at the end of each year, the principal investigator must provide the committee with a brief summary of the research conducted in the past year, a table detailing the numbers and species used, and a statement assuring the committee that the investigator is familiar with the definition of significant changes, and that no such changes have occurred. A significant change includes, but is not limited to, using a different species, an increase in numbers, or the addition of any procedure that may increase pain, distress, or discomfort.
- b. After the third report is submitted (end of year three), the principal investigator must submit a new protocol form, and have the procedures reviewed again, as if it were a new protocol.
- c. If the IACUC refuses to approve the use of animals in an ongoing research project, the IACUC will provide the investigator with a statement as to the reasons for the disapproval, and if necessary will make recommendations for changes in the proposed animal care and use which would lead to approval by the IACUC.
- d. The above described procedures apply also to USDA covered species which require annual review.

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:

- a. If the IACUC becomes aware of activities with animals that are conducted without the IACUC's approval, or that are being conducted in such a way as to endanger the health or wellbeing of animals or humans involved in the animal research, the IACUC will immediately contact the PI and request clarification in writing. Upon receipt of the PI's written account, the IACUC will convene an emergency meeting to discuss possible suspension of activities with animals. Official suspension of activity involving animals can occur only after a majority vote of the quorum of the IACUC members present at the meeting. Following the vote, the IACUC will notify the Institutional Official of its decision in writing, and verify that the unauthorized activity has ceased.
- b. The IO, in consultation with the committee, will then review the reasons for the suspension, and take appropriate corrective action, and report the action, and full explanation to OLAW.

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. Hazard and Risk Assessment for each protocol is carried out by UAA EHSRMS Department, the IACUC, and the PI involved in the research. The Director of UAA EHSRMS Department, as well as the Chemical Safety Officer, sit on the IACUC as non-voting ex officio members to evaluate all protocols, participate in semi-annual program evaluations and inspections, to assess potential hazards and risks to faculty, staff and students who are involved with animal use. All faculty, staff and students involved with a protocol are required to fill out the OHSP Hazard Evaluation Form (a copy of the document can be located at <https://www.uaa.alaska.edu/research/office-of-research-integrity-and-compliance/iacuc/occupational-health-and-safety.cshtml>). The survey enquires about the number, species, and amount of exposure to animals, as well as exposure to biohazard, chemical, and radioactive agents. The survey is then evaluated by UAA EHSRMS Department according to the risk categories outlined in the UAA Occupational Health and Safety Risk Categories Based on Animal Contact and Exposure document (a copy of the document can be located at <https://www.uaa.alaska.edu/research/office-of-research-integrity-and-compliance/iacuc/occupational-health-and-safety.cshtml>). Using the criteria outlined in the document, a person, who works with vertebrate animals will be assigned one of three categories, Risk Level 1, Risk Level 2 or Risk Level 3, based on categorical risks generally associated with the species of animals with which the participant will be working, the average amount of contact per week and the potential risks associated with that category. Risk Level 1 participants are considered to have moderate to high levels of exposure to animals based on their frequency and duration of tasks conducted with animals. Risk Levels 2

and 3 participants are considered to have a low exposure. Exposure means working in a room or field setting with animals present, handling animals, tissues, fluids, secretions, and/or excretions, handling caging and/or equipment contaminated by animal tissues, fluids, secretions, and/or excretions. Incidental exposure refers to duties performed under circumstances or conditions that bear low opportunity for animal related illness or injury. The category assignment is finalized by Veterinary Services in conjunction with UAA EHSRMS with input from the Contract Health Care Provider. The categories are guidelines only and all persons involved must use good judgment to assure that all participants in the Occupational Health and Safety Program use all means possible to minimize their risks.

2. If a Risk Level 1 is assigned, they will be required to fill out a Medical Questionnaire (a copy of the document can be located at <https://www.uaa.alaska.edu/research/office-of-research-integrity-and-compliance/iacuc/occupational-health-and-safety.cshtml>). The Questionnaire enquires about the person's allergy history, medical history (including immunosuppression), past immunizations, pregnancy status, and past biohazard agent exposure. The Questionnaire, which meets federal, state and local HIPAA regulations, is collected and evaluated by the Contract Health Care Provider to provide advice and recommendations to the person to ensure that the work environment is safe. The Questionnaire is kept confidential and is reviewed only by the Contract Health Care Provider.
3. The EHSRMS Department may also require the person to complete training that is administered through UAA's other compliance committees, including the Chemical, Biosafety, and Radiation Committees. It should be noted that official approval of an animal use protocol will not be granted until evidence of this training is forwarded to the IACUC.
4. All personnel who work with animals must complete an online training module that covers occupational health and safety issues, and successfully pass the quiz associated with the occupational health and safety module. The module is called "Personnel and Their Welfare" and it is provided online ([www.citiprogram.org](http://www.citiprogram.org)) by Collaborative Institutional Training Initiative (CITI) as part of the mandatory IACUC training required of all animal personnel. This module covers methods for hazard and risk assessment, and appropriate responses and training.
5. All personnel working with animals must review the approved animal handling procedures for the species with which they are working, and comply with all University policies. The PI(s) will be required to take the appropriate training modules that are available on the IACUC training website or through CITI Animal Care and Use. The IACUC, EHSRMS Department, and the PI will ensure that new personnel are trained prior to any animal handling, will determine whether the personnel need be involved in a preventative medical program (as assessed through a series of health questions), and will provide all necessary personal protective equipment (PPE) (gloves, lab coats, goggles, face shields, boots, or other equipment deemed necessary). All personnel will be trained in the proper usage of the provided PPE. PPE is laundered by a professional laundry service and is carried out by UAA. The IACUC will not approve the addition of any personnel to protocol forms unless the training and health assessment is complete.
6. In the case of an animal caused or related injury (bite, scratch, infection, allergic reaction, needle wound, etc.), the injured person shall wash the wound, notify their supervisor, and report to health services, as needed (unless in a field situation). Supervisors are required to report, as soon as possible, injuries to personnel using the online incident reporting system (available at <https://www.uaa.alaska.edu/about/administrative-services/departments/facilities-campus-services/ehsrms/>) and in the annual protocol review. The EHSRMS Department will also assess how the injury occurred and make recommendations to the PI on how it can be prevented in the future.
7. Researchers working with animals in the field must comply with University guidelines for safe conduct in the field (manual available at <https://www.uaa.alaska.edu/research/office-of-research-integrity-and-compliance/iacuc/occupational-health-and-safety.cshtml> ) and complete the Wildlife Research course of the IACUC training program that is also available



online. They must also complete all required training programs relevant to their field (gun safety, boat safety etc.) This training is in addition to that provided to all personnel who work with animals.

8. All personnel working with chemicals must comply with the Institution's laboratory and chemical safety program (<https://www.uaa.alaska.edu/about/administrative-services/departments/facilities-campus-services/ehsrms/lab-safety.cshtml> ).
- 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:
1. All UAA faculty, staff and students who work with animals must complete the course "Working with the IACUC" provided online by Collaborative Institutional Training Initiative (CITI) (<https://about.citiprogram.org/en/series/animal-care-and-use-acu/> ). The course covers 9 modules on laboratory animal welfare. Below is a sample of the topics covered in this course.
    - Federal Laws, Policies, and Guidelines
    - Role of the Institutional Animal Care and Use Committee
    - Occupational Health and Safety
    - Using Hazardous and Toxic Agents in Animals
    - Stress in Vertebrates
    - Avoiding Unnecessary Duplication
    - USDA Pain/Distress Categories
    - Minimizing the number of animals required to obtain valid results
    - Euthanasia
  2. Other modules are taken as necessary and cover issues such as anesthesia and pain management, minimizing pain and distress, aseptic techniques and surgery, captive wildlife and laboratory animal care, field research, and species-specific modules, such as how to work with rats, hamsters, and mice. The IACUC tracks the training of all personnel, and ensures that personnel listed on protocol forms have the appropriate training.
  3. Personnel working with captive animals also receive instruction on their particular species and handling techniques by trained individuals, and the veterinarian and IACUC review these procedures. Handling methods for the vertebrates currently housed at UAA follow published guidelines.
  4. New IACUC members are provided an orientation to the committee through the IACUC Chair and the IACUC Coordinator. New members are instructed to complete the CITI "Working with the IACUC" course, and the "Essentials for IACUC Members" course. New members are also provided with electronic copies of the Guide, the PHS Policy, the OLAW/ARENA IACUC Guidebook, and the Animal Welfare Act and Animal Welfare Regulations.

#### **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 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.

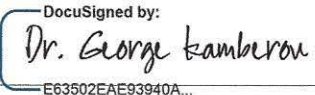
## **V. Recordkeeping Requirements**


- A. This Institution will maintain for at least 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. George Kamberov.
  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. George Kamberov.
  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**

<b>A. Authorized Institutional Official</b>	
Name: Dr. George Kamberov	
Title: Associate Vice Provost Office of Research	
Name of Institution: University of Alaska Anchorage	
Address: <i>(street, city, state, country, postal code)</i> 3211 Providence Dr., BOC3 374 Anchorage, AK 99508	
Phone: 907-786-5472	Fax: 907-786-1791
E-mail: Gkamberov@alaska.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:  <small>E63502EAE93940A...</small>	Date: March 25, 2020

<b>B. PHS Approving Official</b> <i>(to be completed by OLAW)</i>	
<p>Venita B. Thornton, DVM, MPH                  Senior Assurance Officer                  Office of Laboratory Animal Welfare                  National Institutes of Health                  6700-B Rockledge Drive                  Suite 2500, MSC 6910                  Bethesda, Maryland 20892-6910</p>	
Signature: 	Date: <i>March 26, 2020</i>
Assurance Number: <i>D16-00416 (A3710-01)</i>	
Effective Date: <i>March 26, 2020</i>	Expiration Date: <i>Jan. 31, 2024</i>

### VIII. Membership of the IACUC

Date: September 9, 2019			
Name of Institution: University of Alaska Anchorage			
Assurance Number: A3710-01			
<b>IACUC Chairperson</b>			
Name*: Cindy Knall			
Title*: Associate Professor		Degree/Credentials*: PhD	
Address*: ( <i>street, city, state, zip code</i> ) WWAMI School of Medical Education 3211 Providence Dr., CPISB 201R Anchorage, AK 99508			
E-mail*: cmknall@alaska.edu			
Phone*: 907-786-1376		Fax*: 907-786-4700	
<b>IACUC Roster</b>			
Name of Member/ Code**	Degree/ Credentials	Position Title***	PHS Policy Membership Requirements****
Megan Turnquist	DVM	Veterinarian	Veterinarian
2	PhD	Associate Professor, Psychology	Scientist
3	PhD	Assistant Professor, Biology	Scientist
4	BA	Animal Care Tech, retired	Nonaffiliated, scientist
5	PhD	Associate Professor, Psychology	Nonscientist
6	PhD	Assistant Professor, Medical Education	Scientist
7	PhD	Associate Professor, Biology	Scientist
8	MS	Special Education Teacher, retired	Nonaffiliated, nonscientist
9	BS	Director, EHS	Nonscientist, non-voting
10 vacant		Manager, Vivarium	Scientist, non-voting
11	MS	Chemical Hygiene Officer	Scientist, non-voting

\* 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.

<b>Contact #1</b>	
Name: Daniel Allen	
Title: Research Compliance Coordinator	
Phone: 907-786-0916	E-mail: uaa_iacuc_coord@alaska.edu
<b>Contact #2</b>	
Name:	
Title:	
Phone:	E-mail:

## X. Facility and Species Inventory

Date: September 19, 2019			
Name of Institution: University of Alaska Anchorage			
Assurance Number: A3710-01			
Laboratory, Unit, or Building*	Gross Square Feet	Species Housed	Approximate Average Daily Inventory
1	122	NA	
2	122	NA	
3	119	Three-spined stickleback	150
4	123	Three-spined stickleback	220
5	204	Arctic ground squirrels	6
6	86	Arctic ground squirrels (hibernating)	23
7	86	Arctic ground squirrels (hibernating)	18
8	172	NA	
9	108	NA	
10	109	NA	
11	183	Three-spined stickleback	1,200
12	111	Mice (BalbCJ)	20
13	111	Mice (ATP7B(-/-))	71
14	89	NA	
15	96	Red-eared slider turtles	4
16	209	Red-eared slider turtles	29
17	82	NA	
18	250	Wistar rats	50
19	250	NA	
20	577	NA	

\*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.

**Memorandum to:** Dr. George Kamberov,  
Associate Vice Provost for Research and Institutional Official

**From:** Institutional Animal Care and Use Committee

**Subject:** Semiannual Report of the Program Review and Facility Inspection

**Date:** December 13, 2019

This report summarizes the IACUC's results of its most recent program review and facility inspection, as required by the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (*Policy*), Section IV.B.1.-3., the *Guide for the Care and Use of Laboratory Animals (Guide)*, and the Animal Welfare Act (*AWA*) regulations, as applicable. Submission of semiannual reports to the Institutional Official is a condition of this institution's Animal Welfare Assurance with the NIH Office of Laboratory Animal Welfare (OLAW).

**Since the last review, the following changes have occurred in the institution's program for animal care and use (PHS Policy IV.A.1.a.-i.):**

No changes have occurred since the last review. The 4 year renewal of the UAA OLAW Assurance D16-00416 (A3710-01) was submitted to NIH-OLAW on October 2, 2019 and is pending approval. The current approved Assurance is in full force until the renewal is approved.

**I. Description of the Nature and Extent of the Institution's Adherence to the PHS Policy, the Guide, and the AWA**

Departures from the PHS Policy, the *Guide*, and the AWA.

Select A or B:

A. There were no departures during this reporting period.

B. The following departures have been reviewed and approved by the IACUC:

**II. Deficiencies in the Institution's Animal Care and Use Program**

Animal Care and Use Program Review Date(s): October 11, 2019

Select A or B:

A. There were no deficiencies in the program during this reporting period.

B. The following deficiencies have been identified:

**III. Deficiencies in the Institution's Animal Facility**

Animal Facility Inspection Date(s): October 15, 2019

Select A or B:

A. There were no deficiencies in the animal facility during this reporting period.

B. The following deficiencies have been identified:

Minor deficiencies were noted as indicated on the attached Report form.

**IV. Minority Views**

Select A or B:

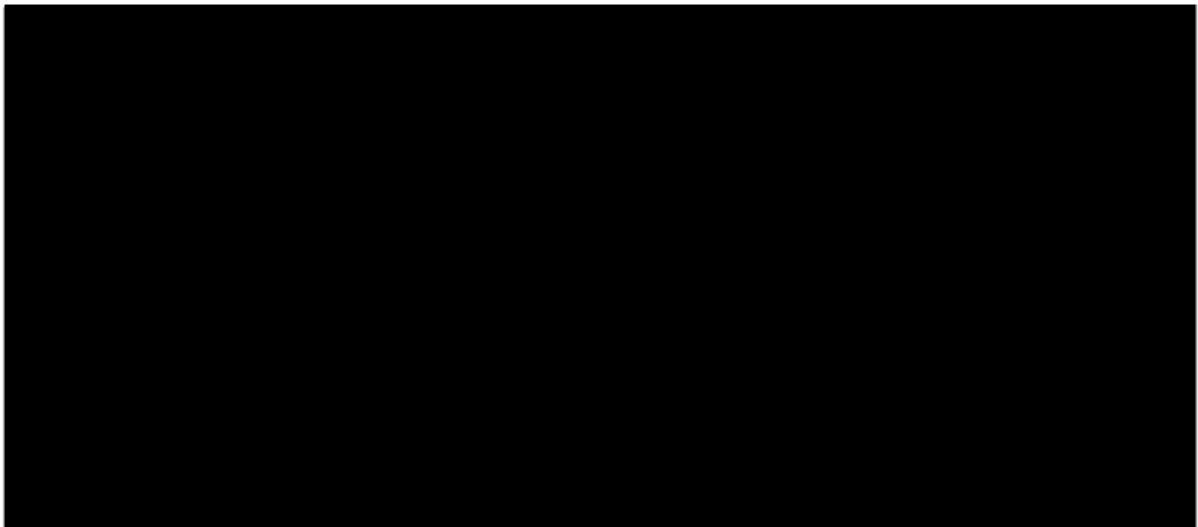
A. No minority views were submitted or expressed.

B. The following minority views were expressed:

**V. Status of AAALAC Accreditation**

N/A

**VI. Signatures**





# I. Semiannual Program Review and Facility Inspection Report

Date: October 15, 2019

Members in Attendance: [REDACTED]

Deficiency Category*	✓	Location	Deficiency and Plan for Correction	Responsible Party	Correction Schedule and Interim Status	Date Complete
Minor		Vivarium	Mouse traps in vestibules placed on railings rather than floors probably by cleaning staff; need to have vivarium staff check periodically	Vivarium staff	Fixed immediately	10/15/19
Minor		Vivarium & EBL	Update all contact sheets on doors with current personnel	EHSRMS, Vivarium & EBL staff	by end of calendar year	12/5/19 in Vivari
Minor		Vivarium	Eye wash, safety shower and sterilizer checks, insure substitute person covering checks when regular staff away	Vivarium staff	Immediately began, in process; verify at next inspection	
Minor		Cage Wash room	Electrical shut-off area needs floor marking to keep space clear for rapid access	Vivarium staff	By next inspection	
Minor		Cage Wash room	Light cover broken; request facilities repair	Vivarium staff	By next inspection	
Minor		Vivarium & Psych	Animal occupied door signs missing from some doors	EHSRMS, Vivarium, EBL & Psych staff	By next inspection	12/5/19
Minor		133B Vivarium	Hepa rack needs prefilter maintenance	Vivarium staff	By next inspection	
Minor		134C	Daisy chained power strip	PI	Immediately began; verify at next inspection	
Minor		134B	Airflow controller panel appears to be malfunctioning	Vivarium staff & facilities	By next inspection	

\* A = acceptable

M = minor deficiency

S = significant deficiency (is or may be a threat to animal health or safety)

NA = not applicable

C = change in program (PHS Policy IV.A.1.a.-i.) (include in semiannual report to IO and in annual report to OLAW)

✓ Check if repeat deficiency