

**University of Washington
IACUC Meeting Minutes: February 16, 2006**

Date of Meeting: February 16, 2006

Members Present: D. Anderson T. Brabb S. Cunningham D. Fitts
V. Gunderson S. Kelley N. Phillips T. Robertson
Batterson
P. Van Hooser B. Whitney

Members Absent: W. Dickhoff P. Lisoskie J. Kauffman M. Tarabochia
K. Waddell

Opening Business

Dr. Cunningham called the meeting to order at 2:34.

Dr. Cunningham called for the approval of the December 15, 2005 meeting minutes. Dr. Gunderson Batterson moved to approve and Dr. Whitney seconded the motion. The minutes were approved with nine members voting in favor.

Attending Veterinarian Report

PROBLEMS ADDRESSED

Dr. Brabb reported that there have been some complications with a swine protocol involved in the gastric bypass project. The group is working closely with veterinary services to address these issues.

PROTOCOL MONITORING:

Dr. Brabb noted that there are 4 active protocols on the veterinary monitoring list.

VETERINARY TREATMENT:

Dr. Brabb also reported there has been no change in the colony health status.

Executive Secretary's Report

Report on packets sent:

Dr. Phillips reported that 5 packets were sent to the Committee since the meeting on December 15, 2005. The 5 packets included 17 new protocols, 45 renewals, 16 of which were three-year renewals requiring a complete Project Review Form, and 137 Significant and Minor Changes. The UW IACUC also reviewed and approved 1 FHCRC protocol with a UW component in it. The IACUC has completed its approval process for most of these items, though some are awaiting final approval due to holds for items such as EH&S approval, OH review or signatures.

Issue of non-compliance:

Dr. Phillips reported that a research group implanted subcutaneous mini-pumps for delivery of isoproterenol or angiotensin II in a group of mice prior to approval by the IACUC. Drs. Phillips and Brabb met with the PI and staff member who performed the surgeries and discussed the issue. The group is working with a collaborator and the collaborator had approval for these surgeries in his protocol. They were thinking of their overall goals and had not really thought through the fact that all the procedures for a given set of animals needs to be in one protocol so that the IACUC will have an understanding of everything that will happen to the animals. They realized their error as soon as the issue was initially brought to their attention and the PI has assured that they will be very careful about making sure all procedures are approved in the future. The Change to the protocol to add the surgery and drugs was submitted and has been approved by the IACUC.

Dr. Phillips also informed the IACUC that this group has not had any previous non-compliances. In addition, the PI's most recent Laws and Regulations training was 2/22/03 and the staff member's last training was 2/7/05.

Dr. Phillips reported that she provided an initial phone report of the non-compliance to OLAW on January 31, 2006.

Discussion followed. Dr. Cunningham moved to send the investigator a letter of counsel recognizing that the error occurred and that the appropriate steps were taken and reminding him of the importance of making sure that everyone has reads the protocol periodically so that everyone is aware of what is approved in the protocol. The vote was unanimous in favor of send the letter of counsel.

Request for Cage Variance:

Dr. Phillips introduced the request by Dr. Crockett for a cage variance in the WaNPRC. By way of background, Dr. Phillips explained that housing space requirements for primates are based on "Group" designation, which is based on animal weight. Group 3 primates are those that weigh up to 10kg. Group 4 primates are those that weigh up to 15kg.

Dr. Phillips informed the IACUC that there have been housing exemptions previously approved by the IACUC for specific animals, to allow three Group 3 primates to be housed in two Group 4 run-through cages. This allows social housing of the animals but the floor space in two Group 4 cages is 0.4 square feet smaller than the floor space specified in the Guide when it is calculated by multiplying the floor space per animal (i.e., 4.3 sq. feet) by three. By this calculation, the three Group 3 primates require 12.9 sq. feet. Two Group 4 cages joined, have 12.5 sq. feet.

Dr. Crockett explained that the Group 4 cages are taller so the animals will actually have more volume when the two cages are connected. She also mentioned the animals that they would like to put in this type of cage set-up are usually younger more active monkeys that would benefit from the taller cages and social contact. Dr. Crockett said she would like to be able to use this type of caging configuration when the need arises instead of for a specific protocol and specific animal as is currently approved. She explained that the Primate Center could move animals into this type of caging quicker if this was a more general approval.

Dr. Phillips moved to accept the cage variance request and that variance be included with Dr. Crockett's protocol (IACUC 3075-01 "Psychological Well-Being Program"). Dr. Brabb seconded the motion. Discussion followed. Dr. Fitts asked if this only applies to existing equipment in the

Primate Centers and not to new caging purchased in the future. He mentioned that new caging purchased in the future should be the proper size. Dr. Crockett confirmed that the caging arraignment would only apply to the existing equipment. Dr. Phillips amended her motion to include the following: To allow three Group 3 primates to be housed in two Group 4 run-through cages when caging that would allow the full 12.9 sq feet of floor space is not available or cannot fit into the housing room. Dr. Brabb agreed to the addition to the motion. The vote was unanimous in favor of accepting the amended motion.

New Policy: Guidelines for Rodent Survival Surgery:

Dr. Brabb presented the draft policy. She explained that the purpose of the policy was to document the instructions researchers are being told by the IACUC during protocol review and during site visit. With a detailed policy in place it will be easier to get this information out.

Discussion followed. Dr. Fitts requested a clarification of point #4 of the draft policy. Dr. Phillips suggested the following wording of the last line of the point, "In some instances, the use of sterile gloves may not be necessary. Such cases must be justified in the investigator's IACUC protocol and a description must be provided as to how the sterile field will be maintained."

Dr. Brabb moved to accept the amended policy. Dr. Kelley seconded the motion. The vote was unanimous in favor of accepting the amended policy.

Proposed Email Reminder to PIs:

Mr. Van Hooser mentioned that during recent protocol and grant reviews he had noticed that a few investigators seem to be confused about when they are approved for specific procedures. He has noticed that once an investigator is approved on one protocol for a procedure, in some cases the investigator may think they are approved for this procedure on all protocols. They may not realize that they and the procedure need to be approved on each protocol. Dr. Phillips volunteered to draft an email clarifying this and that it would be sent on the "Allusers" email list.

Closing Business

The meeting was brought to a close at 3:08 p.m.

The floor was opened to public comment.