



DEPARTMENT OF HEALTH & HUMAN SERVICES

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Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

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Office of Laboratory Animal Welfare  
6700B Rockledge Drive, Suite 2500  
Bethesda, Maryland 20817  
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Facsimile: (301) 480-3387

October 18, 2021

Re: Animal Welfare Assurance  
#A3245-01 (OLAW Case 4.7]

Dr. Melur K. Ramasubramanian  
Vice President for Research  
Professor, Mechanical Engineering  
University of Virginia  
Box 400301  
Charlottesville VA 22904-4301

Dear Dr. Ramasubramanian,

The Office of Laboratory Animal Welfare (OLAW) acknowledges receipt of your December 8, 2021 letter reporting an instance of noncompliance with the PHS Policy on Humane Care and Use of Laboratory Animals at the University of Virginia, following up on an initial report on September 3, 2021. According to the information provided, OLAW understands that the Institutional Animal Care and Use Committee (IACUC) found numerous instances of incomplete or missing documentation regarding husbandry activities and daily health checks in a Principal Investigator (PI) maintained satellite facility. Inadequate documentation extended to food restriction logs, protocol number identification, and specialized cage labeling. Also, mice had not been removed from study when the humane endpoint and weight loss limits had been reached, glucose levels had not been monitored as per protocol, and there were discrepancies between activities performed by this PI on another PI's protocol.

The corrective actions consisted of counseling both PIs, requiring modifications of documents, and placing the laboratory under enhanced IACUC oversight. The actions taken by the PIs included organizing husbandry documentation; updating protocols, forms, standard operating procedures; updating logs covering husbandry, sanitation, weight monitoring, and humane endpoint monitoring; creating a new training document for animal handlers; retraining animal handlers on all new changes; amending protocols to add the PI to collaborator protocols; hiring a new laboratory technician to oversee the space; implementing an oversight plan of daily husbandry activities; ensuring all cage labels were accurate; and submitting progress reports to the IACUC. The IACUC approved the amended protocols and accepted the corrective actions implemented by the PI.

Based on its assessment of this explanation, OLAW understands that measures have been implemented to correct and prevent recurrence of this problem. OLAW concurs with the actions taken by the IACUC to comply with the PHS Policy.

Sincerely,

(b) (6)

Axel Wolff, M.S., D.V.M.  
Deputy Director  
Office of Laboratory Animal Welfare

cc: IACUC Chair

**University of Virginia**  
**Animal Welfare Compliance Report**  
*PHS Assurance # A3245-01*

The Institutional Animal Care and Use Committee found the following compliance issue while performing an assessment in the vivaria. A preliminary email notification was sent to the OLAW Division of Compliance Oversight by Angela Gamble, Director of the Office of Animal Welfare. Dr. Axel Wolff acknowledged receipt. It was understood that a full report would be submitted following an IACUC investigation. This document is a summary of the incident, actions taken, and final resolution.

**UVA Compliance Case #: 2021-P**

<b>Nature of Incident(s):</b>	Failure to maintain appropriate animal-related records for husbandry duties, daily health monitoring, and humane endpoint monitoring within a PI-managed housing facility and failures to adhere to the approved protocol (mice)
<b>Summary of Incident:</b>	<p>During an assessment in PI-managed housing facilities, a member of the Institutional Animal Care and Use Committee (IACUC) found the following: some animals were found without food (later determined to be on a food restriction); incomplete husbandry documentation; undocumented daily health checks; incomplete CHARMs testing; incomplete food restriction/weight loss logs; deviation from feed regimen as described in protocol; incomplete or unclear protocol number identification and specialized cage labeling; and deviations in from the husbandry SOP.</p> <p>Humane endpoints were not followed in accordance with approved protocol wherein animals were not removed from study when 30% weight loss was reached. The obese animals appeared to be normal even though 30% weight loss was found. According to the protocol, glucose levels were to be monitored as one of the criteria for determining humane endpoints; however, there was no evidence that glucose was being monitored. The PI providing the management of the space was listed as an animal handler on a collaborating PI's protocol. The protocol-related issues noted were found on the collaborator's protocol but were performed by the PI that also was responsible for managing the space.</p>

<p><b>Action taken by IACUC:</b></p>	<p>The IACUC discussed the incident at the next convened meeting and designated several of the findings as significant. Initially, the IACUC sent a joint letter to the PI managing the space and performing the animal work as well as the PI holding the protocol describing the animal work observed. The letter described the deficiencies and required a written corrective action plan describing: management and oversight improvements; methods to ensure humane endpoints would be monitored and adhered; and how protocol deviations would be addressed. The letter indicated modifications were required for several protocols, husbandry SOPs, monitoring documents, husbandry documentation, and methods for retraining collaborating researchers using the space. The PI was required each week to submit electronic copies of husbandry documentation, experimental documentation, and weight records for a sampling of cages. The PI was told that the IACUC would revoke the approval of the use of the space if improvements were not made and reminded the PI that the IACUC holds him responsible for the oversight of the area. The area was subject to increased scrutiny (increased observations) until improvements were noted.</p>
<p><b>Action taken by PIs:</b></p>	<p>Due to the number and severity of issues noted, the Director of the Office of Animal Welfare (OAW) initially met with both PIs to discuss the issues noted and to initiate resolution prior to the issues being reviewed by the IACUC. After the IACUC determined what corrective actions were required, the OAW Director met with the PIs on numerous occasions in order to ensure that protocols, SOPs, documents, monitoring criteria, and training were addressed in accordance with IACUC expectations and regulatory requirements.</p> <p>The initial response letter was submitted by both PIs and outlined their corrective action plans for resolving the issues (oversight and management and protocol related). The PI with oversight responsibilities took immediate steps to organize the husbandry documentation and worked with the OAW Director to update the protocols, forms, and SOPs for clarity and functionality (husbandry logs, sanitation logs, weight monitoring, humane endpoint monitoring). A new training document was created to serve as a checklist for training new animal handlers to use the space. The PI retrained all existing and new animal handlers approved to use the space. In order to improve oversight, the PI was added to each collaborating PI's protocol requesting use of the space. The PI hired a new laboratory technician specifically tasked with daily management and oversight of the space. The corrective action plan outlined the oversight plan between the PI and the new laboratory technician assigned to daily supervision of the PI-managed facility and included oversight methods to ensure all health checks and husbandry duties are performed daily and as required. All cages were examined to ensure that documentation and labeling were complete. The PI retrained all existing animal handlers with respect to the protocol modifications, modifications to the room</p>

	<p>SOP, and associated logs. The PI provided a list of collaborating PIs to the IACUC Office, and they included the revised husbandry SOP to each protocol. The PI submitted documentation weekly as required.</p> <p>The PI with oversight of the protocol modified the protocol for clarity and compliance. Both PIs retrained animal handlers to ensure that humane endpoint monitoring was performed in accordance with the protocol and ACUC expectations.</p>
<b>Action taken by IACUC:</b>	The IACUC reviewed the corrective action plan and activities progressing towards resolution. The IACUC had the OAW Director meet with the PI providing oversight of the space and the supervising laboratory technician. They reviewed the IACUC expectations for PI-managed housing, oversight, accountability, adherence to standards of care, daily husbandry and observation requirements, ensuring compliance, training (protocol, SOP, documents), and maintaining documentation. The IACUC reviewed and approved the associated modified protocol(s) and SOPs. They then felt that the PIs responded appropriately and no further action was deemed necessary.
<b>Decision/Resolution:</b>	The IACUC accepted the corrective action plans and considered the incident resolved.
<b>Federal Funding:</b>	R01GM11937
<b>Notification of Final Disposition:</b>	<input checked="" type="checkbox"/> IO <input checked="" type="checkbox"/> OLAW
<b>Institutional Official:</b> Dr. Melur K. Ramasubramanian	<div style="background-color: #cccccc; padding: 5px; display: inline-block;">(b) (6)</div> Date: 12-8-21

**Wolff, Axel (NIH/OD) [E]**

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**From:** OLAW Division of Compliance Oversight (NIH/OD)  
**Sent:** Friday, December 10, 2021 8:00 AM  
**To:** [REDACTED] (b) (6)  
**Cc:** OLAW Division of Compliance Oversight (NIH/OD)  
**Subject:** RE: Compliance Report 2021-P

Thank you for this report. We will send a response soon.

Axel Wolff, M.S., D.V.M.  
Deputy Director, OLAW

**From:** [REDACTED] (b) (6)  
**Sent:** Wednesday, December 8, 2021 3:02 PM  
**To:** OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>; Wolff, Axel (NIH/OD) [E] <wolffa@od.nih.gov>  
**Cc:** [REDACTED] (b) (6)  
**Subject:** [EXTERNAL] Compliance Report 2021-P

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and are confident the content is safe.

Please find attached the OLAW Compliance Report 2021-P.

Thanks,

[REDACTED] (b) (6)

**Wolff, Axel (NIH/OD) [E]**

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**From:** OLAW Division of Compliance Oversight (NIH/OD)  
**Sent:** Tuesday, September 7, 2021 6:22 AM  
**To:** (b) (6)  
**Cc:** OLAW Division of Compliance Oversight (NIH/OD)  
**Subject:** RE: preliminary notification - UVA (Assurance A3245-01). Case 2021-P

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Thank you for this preliminary report, (b) (6) We will open a new case file and look forward to receiving the final report from the IO after the IACUC has completed its investigation.

Axel Wolff, M.S., D.V.M.  
Deputy Director, OLAW

**From:** (b) (6)  
**Sent:** Friday, September 3, 2021 11:55 AM  
**To:** OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>; Wolff, Axel (NIH/OD) [E] <wolffa@od.nih.gov>  
**Cc:** (b) (6)  
**Subject:** preliminary notification - UVA (Assurance A3245-01). Case 2021-P

Dear OLAW Division of Compliance Oversight,

This is to provide preliminary notification that the University of Virginia IACUC (PHS Assurance #A3245-01) identified several possible significant deficiencies in a PI-Managed Permanent housing facility. The UVA tracking number is listed below. The issues are currently under investigation and review by the IACUC. We are working towards resolution and will send a separate compliance report once resolved.

- 2021-P: failure to adhere to IACUC-approved protocol; failure to maintain appropriate animal-related records.

Should you have any questions or concerns prior to receiving our final report, please do not hesitate to contact me.

Sincerely,

(b) (6)