



DEPARTMENT OF HEALTH & HUMAN SERVICES

PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH

FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare
6700B Rockledge Drive, Suite 2500, MSC 6910
Bethesda, Maryland 20892-6910
Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
6700B Rockledge Drive, Suite 2500
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facsimile: (301) 480-3387

July 1, 2025

Re: Animal Welfare Assurance
A3012-01 [OLAW Case 1L]

Kenneth J. Fridley, Ph.D.
Vice President for Research & Economic Development
Eastern Virginia Medical School
735 Fairfax Avenue
Waitzer Hall, (b) (4)
Norfolk, VA 23507

Dear Dr. Fridley,

The Office of Laboratory Animal Welfare (OLAW) acknowledges receipt of your May 29, 2025, letter in response to the April 16, 2025, letter sent from this Office. The letter provides additional information requested by OLAW regarding allegations of noncompliance with the PHS Policy on Humane Care and Use of Laboratory Animals at Eastern Virginia Medical School.

OLAW requested additional information regarding an excerpt from an internal report obtained by People for the Ethical Treatment of Animals (PETA) via a Freedom of Information Act request. The excerpt described the capture of 5 mouse pups in a full food hopper with a lid by an individual. It is stated the animals were overcrowded and did not have access to water overnight. It is also stated there was evidence the SOP on weaning animals had not been adhered to by the laboratory, and wet chow had not been placed on the cage floor for animals.

Your report identified the IACUC-approved protocol associated with the documents obtained by PETA, which expired in November 2023 and that the research was supported by NIH funding. It is stated the excerpt provided to OLAW was from an email sent by a veterinary technician to a Principal Investigator (PI), informing them of the incident involving the mouse pups. Per the report, a student weaned 5 mouse pups on November 16, 2021, and the following morning, husbandry staff found the animals housed in the food hopper instead of the cage. The cage was overcrowded, and the pups did not have access to water overnight. As a corrective action, the pups were relocated to the holding area of the cage, the lixit was primed, and the cage was returned to the housing rack. It is stated there were no mortalities, and the PI was informed on November 17, 2021. Per the report, the email to the PI included an offer of retraining the individual on animal handling, husbandry, and the weaning SOP. It is understood no documentation was uncovered indicating that retraining did occur.

The report states since the incident was considered isolated and since the animals survived, CompMed determined no further action was required and the incident was not reported to the IACUC or to OLAW as a serious or continuing noncompliance with the PHS Policy. In December 2021, mandatory one-on-one management training for the PI and all laboratory staff was required by the IACUC. The retraining addressed a variety of topics (including weaning of animals) and was required to occur every 6mo for all lab personnel. It is understood in December 2023, the IACUC removed the mandatory training requirement.

Based on email correspondence dated June 9, 2025, the mandatory one-on-one training was required for colony management only. At the time, the PI had multiple protocols involving breeding with sizable mouse colonies and many students rotated through the lab at various time periods. The students and lab personnel assisted the investigator with the mouse colonies since there was no colony manager. The IACUC was notified in 3 separate instances of concerns including cage overcrowding, illegible/improperly annotated cage cards, census discrepancies, and weaning practices. The email states the mandatory training was implemented to address these issues and ensure research staff and new students receive focused training from animal facility staff as an enhancement to the colony management training individuals receive from the PI. The mandatory training was lifted because significant improvements were observed and the IACUC determined the training had been effective. It is reiterated in the email that the incident involving the mouse pups was not reported to the IACUC or OLAW because CompMed determined it was an isolated incident and that no further action was required by the research staff.

The animals on a PHS-funded project lacked access to water overnight and while there were no animal deaths, this incident met the criteria for reportability to OLAW. The Guide Notice NOT-OD-05-034 entitled "Guidance on Prompt Reporting to OLAW under the PHS Policy on Humane Care and Use of Laboratory Animals" provides examples of reportable situations. This incident should have been reported to OLAW based on the following requirements:

- Failure to maintain appropriate animal-related records.
- Chronic failure to provide space for animal in accordance with recommendations of the *Guide*.
- Conditions that jeopardize the health or well-being of animals.
- Also possibly: participation in animal -related activities by individuals who have not been determined by the IACUC to be appropriately qualified and trained (i.e., the students).

Additionally, a corrective action plan to address the incident should have occurred to prevent future recurrence of a similar event, such as the retraining offered by the veterinary technician. Your letter acknowledges that no records could be located to confirm if the offered training occurred, and no information was provided stating the responsible individual was addressed regarding the incident by veterinary staff or others. Please ensure CompMed communicates such findings/incidents to the IACUC for determination of reportability to OLAW.

Thank you for your response regarding this matter. We find no cause for further action by this Office.

Sincerely,
JACQUELYN T.
TUBBS -S
Jacquelyn Tubbs, DVM, DACLAM
Acting Director
Division of Compliance Oversight
Office of Laboratory Animal Welfare

Digitally signed by
JACQUELYN T. TUBBS -S
Date: 2025.07.01 11:23:16
-04'00'

cc: IACUC Contact

Ware, Teagan (NIH/OD) [E]

From: Tubbs, Jacquelyn (NIH/OD) [E]
Sent: Tuesday, June 10, 2025 7:47 AM
To: (b) (6) OLAW Division of Compliance Oversight (NIH/OD)
Cc: Ware, Teagan (NIH/OD) [E]; Fridley, Kenneth J.; (b) (6) Hosseini, Ali; (b) (6)
Subject: RE: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***

Follow Up Flag: Follow up
Flag Status: Flagged

Thank you for the additional information.

J. Tubbs

From: (b) (6)
Sent: Monday, June 9, 2025 7:48 PM
To: Tubbs, Jacquelyn (NIH/OD) [E] <jacquelyn.tubbs@nih.gov>; OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>
Cc: Ware, Teagan (NIH/OD) [E] <teagan.ware@nih.gov>; Fridley, Kenneth J. <kfridley@odu.edu>; (b) (6); Hosseini, Ali <hosseia@odu.edu>; (b) (6)
Subject: [EXTERNAL] RE: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***
Importance: High

Sent on behalf of Kenneth J. Fridley, Ph.D., Institutional Official; (b) (6); and Alireza Hosseini, M.D., IACUC Chair

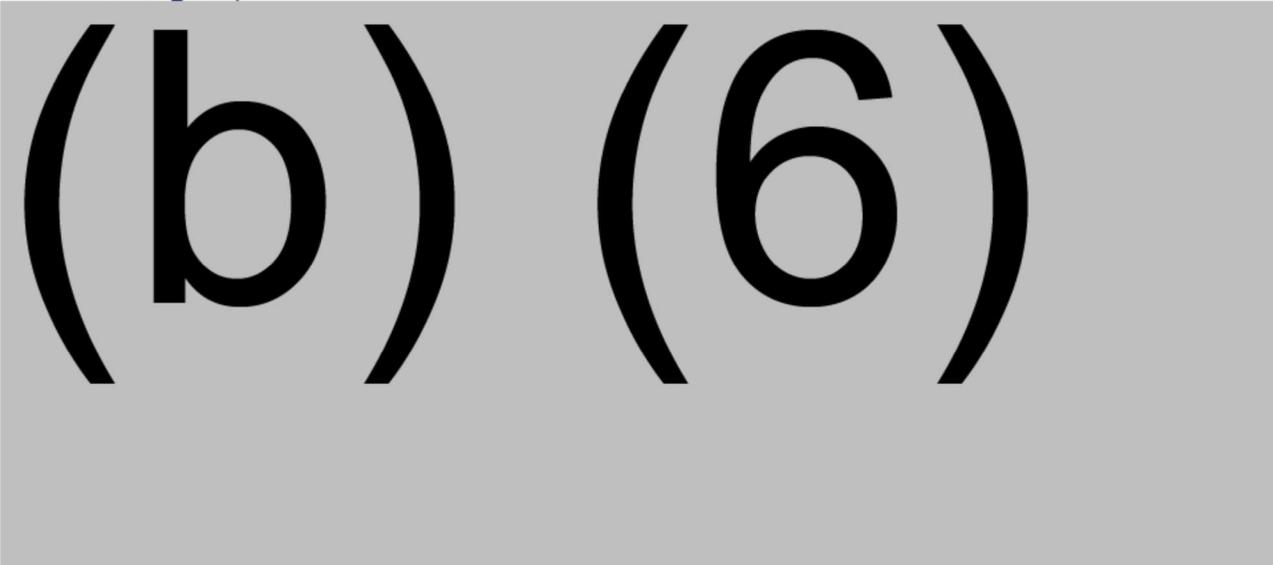
Dear Dr. Tubbs:

The mandatory one-on-one training for the investigative team was related to mouse colony management only. During the time in question, the principal investigator (PI) had several IACUC-approved protocols that involved breeding and sizable mouse colonies. Additionally, a number of students rotated through the laboratory for defined periods of time as part of their educational program. Because a dedicated colony manager was not part of the investigative team, the students and lab personnel assisted the PI with the mouse colonies. On three separate occasions between June and November 2021, the IACUC was informed of concerns related to institutional best practices. Those concerns included cage overcrowding, illegible/improperly annotated cage cards, census discrepancies, and weaning practices. None of the concerns violated regulatory requirements, consisted of off-protocol activity, or resulted in animal welfare incidents to be reported to OLAW. The purpose of the mandatory training was to address the noted concerns and to ensure that lab personnel and new students to the lab periodically received focused training from the animal facility staff to enhance the colony management training they received from the PI, with the intended goal of avoiding future concerns that could result in serious animal health and welfare incidents. As stated, in December 2023, the IACUC lifted the 6-month training requirement because significant improvement had been observed, laboratory personnel and the students were more experienced with colony management/husbandry which resulted in more proficient management, and the Committee felt that the mandated training had been effective. The IACUC was not informed of additional colony management concerns or noncompliant events during the stated time frame.

As stated in the original report to OLAW dated May 29, 2025, the IACUC was not informed of the November 2021 incident prior to OLAW's April 16, 2025 letter to Dr. Fridley, Institutional Official; therefore, the one-on-one training mandated by the IACUC in December 2021 was not related to the incident in question.

Please feel free to follow up, if needed.

Kindest regards,



From: Tubbs, Jacquelyn (NIH/OD) [E] <jacquelyn.tubbs@nih.gov>

Sent: Friday, June 6, 2025 9:17 AM

To: (b) (6) OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>

Cc: Ware, Teagan (NIH/OD) [E] <teagan.ware@nih.gov>; Fridley, Kenneth J. <kfridley@odu.edu>; (b) (6)

; Hosseini, Ali <hosseia@odu.edu>; (b) (6)

(b) (6)

Subject: RE: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***

EXTERNAL to ODU: This email is not from an ODU account. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

I'm reviewing the institutional response to my letter from April. The letter states the incident was considered an isolated occurrence without substantiated adverse effects, and CompMed determined no further action was required by the research team, and that the matter was not reportable to the IACUC or OLAW. Then, the following month the IACUC mandated one-on-one colony management training for the PI and all lab personnel. The training covered a variety of topics, including weaning, and retraining was required every 6mo for all lab members until otherwise determined by the IACUC.

Please clarify why the IACUC mandated retraining for all lab members since it was previously stated there was no serious or continuing noncompliance identified and no further action was required by the lab. Please describe what change(s) occurred that prompted the IACUC to require mandatory training at repeated intervals with additional oversight via PAM. It is stated the retraining requirement was initiated in December 2021 and lifted in December 2023. Did additional noncompliant events occur during this time frame within the lab? Please clarify.

Ware, Teagan (NIH/OD) [E]

From: (b) (6)
Sent: Friday, June 6, 2025 9:36 AM
To: Tubbs, Jacquelyn (NIH/OD) [E]; OLAW Division of Compliance Oversight (NIH/OD)
Cc: Ware, Teagan (NIH/OD) [E]
Subject: [EXTERNAL] RE: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***

Follow Up Flag: Follow up
Flag Status: Flagged

Good morning, Dr. Tubbs!

I acknowledge receipt of our request. A follow up response will be sent soon.

Kindest regards,

(b) (6)

(b) (6)

From: Tubbs, Jacquelyn (NIH/OD) [E] <jacquelyn.tubbs@nih.gov>
Sent: Friday, June 6, 2025 9:17 AM
To: (b) (6) OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>
Cc: Ware, Teagan (NIH/OD) [E] <teagan.ware@nih.gov>; Fridley, Kenneth J. <kfridley@odu.edu>; (b) (6)
(b) (6) Hosseini, Ali <hosseia@odu.edu>; (b) (6)
(b) (6)
(b) (6)
Subject: RE: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***

EXTERNAL to ODU: This email is not from an ODU account. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning,

I'm reviewing the institutional response to my letter from April. The letter states the incident was considered an isolated occurrence without substantiated adverse effects, and CompMed determined no further action was required by the research team, and that the matter was not reportable to the IACUC or

May 29, 2025

Jacquelyn T. Tubbs, D.V.M., DACLAM
Acting Director, Division of Compliance Oversight
Office of Laboratory Animal Welfare (OLAW)
National Institutes of Health (NIH)
6700B Rockledge Drive
Suite 2500, MSC 6910
Bethesda, MD 20892

Dear Dr. Tubbs:

**RE: OLAW Investigative Report (Case A3012-1L)
Macon & Joan Brock Virginia Health Sciences at Old Dominion University (VHS), Norfolk, Virginia
Animal Welfare Assurance Number D16-00007**

As requested in your correspondence dated April 16, 2025, please find our response in reference to the allegation of noncompliance with the PHS Policy on Humane Care and Use of Laboratory Animals (PHS Policy) submitted to OLAW by People for the Ethical Treatment of Animals (PETA) based on documents obtained from a Freedom of Information Act request to the U.S. Department of Agriculture.

The relevant IACUC-approved protocol, which expired in November 2023, was supported by NIH (R01) funds. Division of Comparative Medicine (CompMed) animal facility records reveal that the excerpt included in your letter is from an email sent by a veterinary technician to the Principal Investigator (PI) on November 17, 2021, apprising the PI of the incident. Based upon documentation, a student weaned a cage of 5 mouse pups late in the day on November 16, 2021. Early the next morning during rounds, CompMed husbandry staff discovered that the animals were captured in the food hopper instead of in the cage, that the cage was overcrowded, and that the pups had been without water overnight. The CompMed staffer moved the pups from the hopper to the holding area of the cage, primed the water lixit, and placed the cage back on the housing rack. All 5 animals survived. The veterinary technician informed the PI of the incident via email the morning of November 17, 2021. That email included an offer to retrain the lab personnel on animal handling and husbandry and the weaning SOP. We have been unable to locate any documentation that such retraining occurred.

Because the incident was an isolated occurrence and the animals survived without substantiated adverse effects, CompMed determined that no further action was required by the research team, and the incident was not reported to the IACUC or to OLAW as serious or continuing noncompliance with PHS Policy.

In December 2021, the IACUC mandated one-on-one colony management training for the PI and all lab personnel. The training was conducted by CompMed and addressed the following topics: mandatory documentation; breeding practices; proper cage identification and designations; pregnancy determination; sexing; weaning; setting up a cage; and communication with CompMed in a timely manner. Retraining was required every 6 months for all lab personnel until otherwise determined by the IACUC. The research team complied with the training mandate. The initial trainings were completed by the February 2022 deadline, and 6-month retraining was completed in August 2022, February 2023, and August 2023 as documented by CompMed. Colony management practices and related documentation

were regularly monitored by the PAM auditor and observations were reported to the IACUC. In December 2023, the IACUC lifted the mandatory training requirement.

Please do not hesitate to follow up should you have questions and/or concerns regarding this matter.

Sincerely,

(b) (6)

Kenneth J. Fridley, Ph.D.
Vice President for Research & Economic Development
Institutional Official
Old Dominion University
kfridley@odu.edu

(b) (6)

KJF/(b) (6)

cc: Attending Veterinarian, VHS
Sr. Associate Vice President for Research, VHS
IACUC Chair, VHS

Ware, Teagan (NIH/OD) [E]

From: Tubbs, Jacquelyn (NIH/OD) [E]
Sent: Friday, May 30, 2025 6:15 AM
To: (b) (6) L.; OLAW Division of Compliance Oversight (NIH/OD)
Cc: Ware, Teagan (NIH/OD) [E]; Fridley, Kenneth J. (b) (6) ; (b) (6)
Subject: RE: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***

Good morning,

Thank you for the report. We will send an official response soon.

Kind Regards,

J. Tubbs

From: (b) (6)
Sent: Friday, May 30, 2025 2:39 AM
To: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>
Cc: Tubbs, Jacquelyn (NIH/OD) [E] <jacquelyn.tubbs@nih.gov>; Ware, Teagan (NIH/OD) [E] <teagan.ware@nih.gov>; Fridley, Kenneth J. <kfridley@odu.edu>; (b) (6)

(b) (6)
Subject: [EXTERNAL] FW: OLAW Case A3012-1L - ***INSTITUTIONAL RESPONSE***
Importance: High

Dear Dr. Tubbs:

**RE: OLAW Investigative Report (Case A3013-1L)
Macon & Joan Brock Virginia Health Sciences at Old Dominion University (VHS), Norfolk, Virginia
Animal Welfare Assurance Number D16-00007**

The institutional response to OLAW case A3012-1L is attached. Contact information for Dr. Kenneth Fridley, Institutional Official and (b) (6) is included in the response. Please do not hesitate to contact me if I may be of assistance.

Kindest regards

(b) (6)



DEPARTMENT OF HEALTH & HUMAN SERVICES

PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH

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FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
6700B Rockledge Drive, Suite 2500
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Facsimile: (301) 480-3387

April 16, 2025

Re: Animal Welfare Assurance
A3012-01 [OLAW Case 1L]

Kenneth J. Fridley, Ph.D.
Vice President for Research & Economic Development
Eastern Virginia Medical School
735 Fairfax Avenue
Waitzer Hall, (b) (4)
Norfolk, VA 23507

Dear Dr. Fridley,

The Office of Laboratory Animal Welfare (OLAW) has received from People for the Ethical Treatment of Animals (PETA) allegations of noncompliance with the PHS Policy on Humane Care and Use of Laboratory Animals at Eastern Virginia Medical School, via documents PETA obtained via a Freedom of Information Act request to the U.S. Department of Agriculture on November 16, 2021. It is possible that such occurrences should have been reported directly to our office as required by the PHS Policy and per your commitment to do so in your Animal Welfare Assurance.

An excerpt from an internal report received by PETA was provided to OLAW for review and states the following:

“Somehow, [the student] managed to capture all five mouse pups in the full food hopper with the lid. The mice were severely overcrowded and had no access to water overnight. Further inspection of the cage showed evidence your students are not following the SOP on weaning that was developed specifically for your lab. Rather than placing wet chow in the cage in a bowl, dry chow was dropped on the floor of the cage without a container. This SOP was required by the IACUC for your lab to continue research and should not in any way be regarded as optional.”

Please instruct the IACUC, avoiding any conflict of interest, to send a report, signed by you as the Institutional Official, to the following OLAW email inbox: OLAWdco@od.nih.gov and provide information regarding any PHS/NSF/DHHS/NASA funding of activities related to this potential incident. If the funding source is subject to OLAW oversight, please provide a description of the occurrences and all corrective/preventive actions.

We appreciate your cooperation and ask that you please provide the requested information by **May 30, 2025**. Please contact me if I can be of assistance at jacquelyn.tubbs@nih.gov.

Sincerely,

JACQUELYN T.
TUBBS -S

Digitally signed by JACQUELYN
T. TUBBS -S
Date: 2025.04.16 12:07:52 -04'00'

Jacquelyn Tubbs, DVM, DACLAM
Senior Animal Welfare Program Specialist
Division of Compliance Oversight
Office of Laboratory Animal Welfare

cc: IACUC Contact

Ware, Teagan (NIH/OD) [E]

From: Fridley, Kenneth J. <kfridley@odu.edu>
Sent: Wednesday, April 16, 2025 3:22 PM
To: Ware, Teagan (NIH/OD) [E]
Cc: OLAW Division of Compliance Oversight (NIH/OD); Hosseini, Alireza
Subject: [EXTERNAL] Re: OLAW case A3012-1L

Follow Up Flag: Follow up
Flag Status: Completed

Teagan,
I am acknowledge receipt of the report and will respond no later than May 30, 2025.
Best regards,
Ken



Kenneth J. Fridley, Ph.D, F.ASCE
Vice President for Research and Economic Development
Old Dominion University
Norfolk, VA 23529
Email: kfridley@odu.edu
(b) (6)

From: Ware, Teagan (NIH/OD) [E] <teagan.ware@nih.gov>
Date: Wednesday, April 16, 2025 at 12:53 PM
To: Fridley, Kenneth J. <kfridley@odu.edu>
Cc: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>, Hosseini, Alireza <hosseia@evms.edu>
Subject: OLAW case A3012-1L

EXTERNAL to ODU: This email is not from an ODU account. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good afternoon Dr. Fridley,

Attached please find an investigative report from Dr. Tubbs, assigned OLAW case A3012-1L. Please note a response on this matter is requested and should be submitted to OLAW by no later than **May 30, 2025**.

If you have any questions, please feel free to contact us by e-mail or by phone.

Best,
Teagan

Teagan Ware, MS, PMP
Animal Welfare Program Analyst

Division of Compliance Oversight
Office of Laboratory Animal Welfare
National Institutes of Health
6700B Rockledge Drive, Room 2505

Phone: 301-435-2390

Email: teagan.ware@nih.gov

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PEOPLE FOR THE ETHICAL TREATMENT OF ANIMALS

Washington
1536 16th St. N.W.
Washington, DC 20036

(b) (6)

Los Angeles
2154 W. Sunset Blvd.
Los Angeles, CA 90026

(b) (6)

Norfolk
501 Front St.
Norfolk, VA 23510

(b) (6)

Info@peta.org
PETA.org



Entities:

- PETA Asia
- PETA India
- PETA France
- PETA Australia
- PETA Germany
- PETA Switzerland
- PETA Netherlands
- PETA Foundation (U.K.)



April 16, 2025

Brent Morse, DVM
Director
Division of Compliance Oversight
Office of Laboratory Animal Welfare

Via e-mail: morseb@mail.nih.gov

Dear Dr. Morse:

I am writing to request that your office investigate possible noncompliance with the Public Health Service Policy on Humane Care and Use of Laboratory Animals (PHS Policy) and the *Guide for the Care and Use of Laboratory Animals* (the *Guide*) related to the treatment of animals at Eastern Virginia Medical School (EVMS; PHS-Approved Animal Welfare Assurance #D16-00007), located at 700 West Olney Road in Norfolk, Virginia.

According to documents obtained by PETA via a Freedom of Information Act request to the U.S. Department of Agriculture, on November 16, 2021, an EVMS student “weaned a cage of five mice and placed them in slot R217 on the racks.” An [internal report](#) of this incident states:

Somehow, [the student] managed to capture all five mouse pups in the full food hopper with the lid. The mice were severely overcrowded and had no access to water overnight. Further inspection of the cage showed evidence your students are not following the SOP on weaning that was developed specifically for your lab. Rather than placing wet chow in the cage in a bowl, dry chow was dropped on the floor of the cage without a container. This SOP was required by the IACUC for your lab to continue research and should not in any way be regarded as optional.

It appears to us that the issues raised in this internal report—failure to ensure that animals “have access to potable, uncontaminated water”; failure to ensure that animals were provided “sufficient space” to “meet physical, physiologic, and behavioral needs”; failure to allow for adequate ventilation to “provide appropriate air quality”; and failure to ensure that “personnel involved with the care and use of animals” were “adequately ... trained” to comply with SOPs—indicate noncompliance with PHS Policy and the *Guide*. Moreover, it does not appear that EVMS self-reported this incident to OLAW.

We urge your office to thoroughly investigate the incident detailed in the internal report and assess whether EVMS has complied with its obligation to self-report problems in its laboratories. Prompt and decisive action is warranted to address these apparent violations and to help prevent future lapses in oversight and animal welfare.

Thank you for your time and consideration.

Sincerely,

(b) (6)

Ware, Teagan (NIH/OD) [E]

From: (b) (6)
Sent: Wednesday, April 16, 2025 10:08 AM
To: OLAW Division of Compliance Oversight (NIH/OD)
Subject: [EXTERNAL] RE: Concerns regarding the treatment of animals at Eastern Virginia Medical School:

Good morning, Ms. Ware,

Please call me (b) (6). Thank you so much for acknowledging my letter. I appreciate OLAW looking into the outlined concerns.

Kind regards,

(b) (6)

From: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>
Sent: Wednesday, April 16, 2025 10:02 AM
To: (b) (6)
Cc: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>
Subject: RE: Concerns regarding the treatment of animals at Eastern Virginia Medical School:

Good morning (b) (6),

This is to acknowledge receipt of your email and attached letter. OLAW will review the information and take any action required by the PHS Policy.

Best,
Teagan

Teagan Ware, MS, PMP
Animal Welfare Program Analyst
Division of Compliance Oversight
Office of Laboratory Animal Welfare
National Institutes of Health
6700B Rockledge Drive, Room 2505

Phone: 301-435-2390
Email: teagan.ware@nih.gov

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From: (b) (6)
Sent: Wednesday, April 16, 2025 9:46 AM

To: OLAW Division of Compliance Oversight (NIH/OD) <olawdco@od.nih.gov>

Subject: [EXTERNAL] FW: Concerns regarding the treatment of animals at Eastern Virginia Medical School:

Good morning,

I received Dr. Morse's out-of-office response, which directed me to forward noncompliance concerns to this address. Thank you for your consideration.

Sincerely,

(b) (6)

From: (b) (6)

Sent: Wednesday, April 16, 2025 9:30 AM

To: Morse, Brent (NIH/OD) [E] <morseb@mail.nih.gov>

Subject: Concerns regarding the treatment of animals at Eastern Virginia Medical School:

April 16, 2025

Brent Morse, DVM
Director
Division of Compliance Oversight
Office of Laboratory Animal Welfare

Via e-mail: morseb@mail.nih.gov

Dear Dr. Morse:

I am writing to request that your office investigate possible noncompliance with the Public Health Service Policy on Humane Care and Use of Laboratory Animals (PHS Policy) and the *Guide for the Care and Use of Laboratory Animals* (the *Guide*) related to the treatment of animals at Eastern Virginia Medical School (EVMS; PHS-Approved Animal Welfare Assurance #D16-00007), located at 700 West Olney Road in Norfolk, Virginia.

According to documents obtained by PETA via a Freedom of Information Act request to the U.S. Department of Agriculture, on November 16, 2021, an EVMS student “weaned a cage of five mice and placed them in slot R217 on the racks.” An [internal report](#) of this incident states:

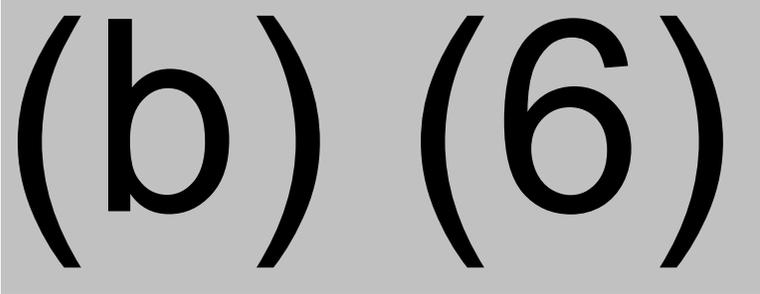
Somehow, [the student] managed to capture all five mouse pups in the full food hopper with the lid. The mice were severely overcrowded and had no access to water overnight. Further inspection of the cage showed evidence your students are not following the SOP on weaning that was developed specifically for your lab. Rather than placing wet chow in the cage in a bowl, dry chow was dropped on the floor of the cage without a container. This SOP was required by the IACUC for your lab to continue research and should not in any way be regarded as optional.

It appears to us that the issues raised in this internal report—failure to ensure that animals “have access to potable, uncontaminated water”; failure to ensure that animals were provided “sufficient space” to “meet physical, physiologic, and behavioral needs”; failure to allow for adequate ventilation to “provide appropriate air quality”; and failure to ensure that “personnel involved with the care and use of animals” were “adequately ... trained” to comply with SOPs—indicate noncompliance with PHS Policy and the *Guide*. Moreover, it does not appear that EVMS self-reported this incident to OLAW.

We urge your office to thoroughly investigate the incident detailed in the internal report and assess whether EVMS has complied with its obligation to self-report problems in its laboratories. Prompt and decisive action is warranted to address these apparent violations and to help prevent future lapses in oversight and animal welfare.

Thank you for your time and consideration.

Sincerely,

A large grey rectangular redaction box covering the signature area. Inside the box, the text "(b) (6)" is written in large, bold, black font, indicating that the signature and name are redacted under FOIA exemptions (b) and (6).

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