Is Your Laboratory Inspection Ready???

Inspections Coming Soon...

As Semiannual IACUC inspections and the AAALAC International Accreditation Site Visit are quickly approaching it is the time to pull out the check list and make sure that your lab is Inspection Ready.

Where to Start...

In the past the PAL Bulletin has provided some checklists and tip sheets to make the job a little easier. Your lab may also have its own lists to utilize. Visit the IACUC website and click on the PAL Bulletin tab to access past IACUC Inspection Bulletins.

IACUC Approved Protocols

Make sure that research personnel have access to the protocols they are listed on and know what procedures they are responsible for.

All procedures must be conducted as specifically described in the IACUC protocol. Everyone on your research team must be keenly aware of the details of the protocol including (but not limited to):

- Procedures (survival, nonsurvival, surgical, and nonsurgical)
- Analgesia (dosages and times)
- Euthanasia (including secondary form of euthanasia where applicable)

Certifications of Hoods and Vaporizers

Hoods and biosafety cabinets must be certified annually. For more information on certification visit the IACUC website.

Storage of Controlled Substances

Controlled substances should be stored and documented according to DEA regulations. Controlled drugs are to be stored under double lock and key and must have records of receipt and usage available for viewing.
Lab personnel that are authorized to access controlled drugs and records should be available at the time of the inspection.

Visit the IACUC Website to review the new UNMC/UNO Controlled Drug Policy and the DEA website for more information on the Federal Regulations.

**Title 21 Regulations & Codified CSA**

**Lab, Instrument, and Equipment Sanitation**

Laboratories where animals are utilized are to be kept clean and uncluttered.

All instruments and or equipment that come into contact with animals must be sanitized and disinfected before and after use.

- This includes: clippers, scissors, restraint devices, instruments, containers, etc.

**Do not** use equipment that is porous and cannot be sanitized and disinfected. This includes necropsy boards.

- If Styrofoam necropsy boards are used they must have disposable covers or be disposed of after each use.

- If wooden devices are to be used they must be sealed with paint or polyurethane.

**Animal Procedure Areas**

All areas where animals are present or where procedures are performed must be sanitized and disinfected after every use and kept clean between uses.

**Survival Surgery**

Major survival surgery on most animals must be conducted, using aseptic techniques in surgical facilities specifically intended for that purpose. These techniques include:

- Wearing sterile surgical gloves, gowns, caps and face masks;
- Using sterile supplies and instruments;
- Maintaining an aseptically prepared surgical field.

Survival surgery on rodents does not require a special facility but must be performed utilizing the following guidelines:

- Wearing surgical gloves;
- Using sterile instruments;
- Maintaining and conducting surgery on a clean, uncluttered lab bench or table surface.

**Survival Surgery Record Keeping**

For USDA covered species you must keep records documenting the surgery/procedure, drugs administered, and recovery on individual animals.

For non-covered species records documenting survival surgery should be kept in some form (i.e. forms, notebooks, or cage cards) to document the procedure, drugs administered, and recovery.

**Proper Disposal of Biohazards**

Biohazardous waste including animal carcasses must be disposed of in Red biohazard containers and taken to designated campus pick up sites, or set out for pick up by Environmental Services.

- All Biohazard containers must have a secure lid in place when not in use.

- Biohazard containers should be considered full when they are ½ to ¾ full but not to exceed 50 lbs.

- Biohazard bags should be tied prior to placing the lid on.

**Gas Scavenging**

A gas scavenging system is required for the use of gas anesthesia or euthanasia.

- Gas anesthesia by open drop method must be performed in a vented hood.

- Gas anesthesia delivered via a certified vaporizer must be connected to an exhaust or connected to a scavenging canister. The canister must be monitored by weight, and or number of hours utilized in accordance with the manufacturer guidelines.

**Secure Gas Cylinders**

Gas cylinders must be secured to a permanent anchor, or be properly belted to a cylinder tank stand.
Questions and Answers From the Office of Laboratory Animal Welfare (OLAW)…Please visit the OLAW website for a complete list of questions.

Frequently Asked Questions - PHS Policy on Humane Care and Use of Laboratory Animals - Office of Laboratory Animal Welfare

Q: What are the requirements for conducting rodent survival surgery?

In accord with the Guide, the species of animal influences the components and intensity of the surgical program and modification of standard techniques might be desirable or even required, but should not compromise the well-being of the animals. It further notes that some characteristics of common laboratory-rodent surgery, such as smaller incision sites, fewer personnel in the surgical team, manipulation of multiple animals at one sitting, and briefer procedures, can make modifications in standard aseptic techniques necessary or desirable. For most rodent surgery, a facility may be small and simple, such as a

*Please be advised that new and continuing animal use protocols that use inhalants or anesthetics to perform RODENT euthanasia ARE required to utilize a method to ensure death following euthanasia.

Since the anesthetic effects of inhalant anesthetics are reversible, animals that are removed prematurely from the chamber prior to death can recover. Thus, the IACUC requires a physical method to ensure death following euthanasia by inhalant anesthetics prior to carcass disposal.

Examples of acceptable physical methods include:

- Cervical dislocation (rats must be less than 200 g)
- Decapitation
- Bilateral thoracotomy
- Exsanguination
- Removal of vital organs

UNMC/UNO IACUC POLICY 3.3.10 Euthanasia Euthanasia Policy