



DEPARTMENT OF HEALTH & HUMAN SERVICES

recd 6/11/07  
PJH  
PUBLIC HEALTH SERVICE  
NATIONAL INSTITUTES OF HEALTH

FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare  
Division of Assurances  
6705 Rockledge Drive  
RKL 1, Suite 360, MSC 7982  
Bethesda, Maryland 20892-7982  
Home Page: <http://grants.nih.gov/grants/olaw/olaw.htm>

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare  
Division of Assurances  
6705 Rockledge Drive, Suite 360  
Bethesda, Maryland 20817  
Telephone: (301) 496-7163  
Facsimile: (301) 402-7065

Date: June 5, 2007

Reference: Assurance #**A3420-01**

Dr. Peter Dolce  
Associate Vice President for Research  
Meharry Medical College  
1005 Dr. D. B. Todd Jr. Bvd.  
Nashville, TN 37208-3599

Dear Dr. Dolce:

The Office of Laboratory Animal Welfare (OLAW) reviewed and approved the renewal of your institution's Animal Welfare Assurance (Assurance) that was submitted in compliance with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy), as revised August 2002.

Your Assurance renewal, number **A3420-01**, became effective on June 5, 2007 and expires on June 30, 2011. This Assurance supersedes all previously issued Assurances. Please include the Assurance number in all correspondence to OLAW.

The Assurance is a key document in defining the relationship of your Institution to the PHS. It sets forth the responsibilities and procedures of your Institution regarding the care and use of laboratory animals. Among the important elements of the Assurance, I would especially call your attention to the reporting requirements that are essential for continued compliance with the PHS Policy. Please note that a Report to OLAW is required at least once every 12 months. The reporting period, unless otherwise requested in writing, is the calendar year. Reports, for the previous calendar year, are due January 31.

A copy of the Assurance signature page is enclosed. If I may be of further assistance, please do not hesitate to contact me.

Thank you for your attention in these matters.

Sincerely,

*Elizabeth Gard DVM, DACLAM*

Elizabeth A. Gard, D.V.M., D, ACLAM  
Assurance Officer (Contractor)  
Office of Laboratory Animal Welfare

Enclosure:As stated

cc: Dr. Darryl Hood  
IACUC Chair

Renewal Approval A3420-01 Meharry Medical College

## **MEHARRY MEDICAL COLLEGE**

### **Assurance Of Compliance With Public Health Service (PHS) Policy On Humane Care And Use Of Laboratory Animals**

Meharry Medical College, hereinafter referred to as "institution," hereby gives assurance that it will comply with the Public Health Service Policy on Humane Care and Use of Laboratory Animals, hereinafter referred to as "PHS Policy. "

#### **I. APPLICABILITY**

This Assurance is applicable to all research, research training, experimentation, biological testing, and related activities, hereinafter referred to as activities, involving live, vertebrate animals supported by the PHS and conducted at this institution, or at another institution as a consequence of the subgranting or subcontracting of a PHS-conducted or supported activity by this institution.

"Institution" includes the following branches and major components of Meharry Medical College: School of Medicine, the School of Dentistry, the School of Graduate Studies and Research.

#### **II. INSTITUTIONAL POLICY**

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."

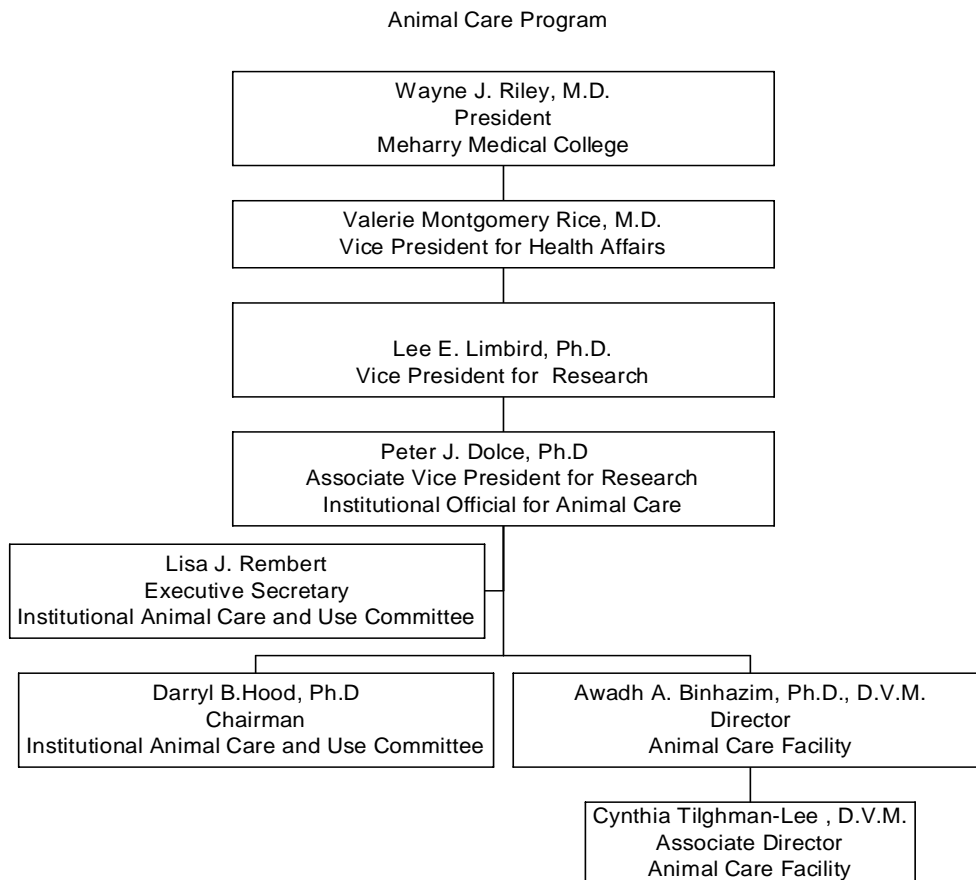
C. This institution acknowledges and accepts responsibility for the care and use of animals involved in activities covered by this Assurance. As partial fulfillment of this responsibility, this institution will make a reasonable effort to ensure that all individuals involved in the care and use of laboratory animals understand their individual and collective responsibilities for compliance with this Assurance as well as all 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 in accordance with the *Guide for the Care and Use of Laboratory Animals (Guide)*.

### III. INSTITUTIONAL PROGRAM FOR ANIMAL CARE AND USE

#### A. The lines of authority and responsibility for administering the program and ensuring compliance with this Policy are shown below.

The chair of the Institutional Animal Care and Use committee and the Director of the Animal



Care Facility both report directly to the Institutional Official (IO) The IO is an Associate Vice President for Research and as such has sufficient authority to oversee the safety and humane care of animal subjects; he reports to the Vice President for Research for all regulatory affairs that pertain to research. The IACUC is staffed by a full time Executive Secretary who report to the Institutional Official and works closely with the IACUC Chair.

#### B. The qualifications, authority, and percent of time contributed by the veterinarian(s) who will participate in the program are described below.

Cynthia Tilghman-Lee, D.V.M., serves as full-time associate ACF director as well as the attending veterinarian; she is a member of the IACUC, provides investigators with professional medical services and consultation, and has direct program authority and responsibility to implement the PHS Policy and the recommendation of the *Guide*.

Dr. Tilghman-Lee completed a residency-training program in the Laboratory Animal Medicine at the University of North Carolina at Chapel Hill. She has over 10 years of experience in the area of laboratory animal medicine and scientific research. She provides educational training to investigators and has several years of experience teaching the AALAS Certification Preparatory Course to Animal Care Technicians. Dr. Tilghman-Lee is the attending veterinarian and has clinical responsibilities for maintaining the general health and welfare of all resident animals.

Additional responsibilities of the associate director consist of (1) supervising the care of animals; maintaining inventory of animals and equipment; assuring that euthanasia is performed in a humane manner and that remains are disposed of properly; (2) ensuring the availability of an adequate supply of laboratory animal feed, bedding, and other supplies; (3) performing and assisting investigators with surgical procedures and other veterinary procedures; (4) supervising animal care technicians; (5) preparing medical records and facility logs and records; (6) maintaining a computerized database for animal inventory and monitoring animal usage following IACUC approved protocols; (7) updating SOPs for the facility; and (8) maintaining a quality assurance program.

Awadh A. Binhazim, D.V.M., M.S., Ph.D., is full time director of the Animal Care Facility. Dr. Binhazim is also a veterinary diagnostician and in addition to the D.V.M. degree, he has a master of science degree in veterinary microbiology and pathology and a Ph.D. in veterinary pathology. Dr. Binhazim completed a veterinary pathology residency program in 1992 at the College of Veterinary Medicine, University of Georgia. He has over 22 years experience in laboratory animal medicine, pathology, diagnostics and biomedical research involving animals. Dr. Binhazim has a faculty appointment at the level of Associate Professor in the Department of Pathology.

**C. This institution has established an Institutional Animal Care and Use Committee (IACUC) that is qualified through the experience and expertise of its members to oversee the institution's animal program, facilities, and procedures.** The IACUC consists of at least five members, and its membership meets the composition requirements set forth in the PHS Policy at IV.A.3.b. Attached is a list of the chairperson and members of the IACUC, and their degrees, position titles, specialties and institutional affiliations.

**D. The IACUC will:**

**1. Review at least once every six 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 evaluations are:

The IACUC meets at least twice annually to review the total animal care program. These meetings are set for a specific date called by the chairperson of the committee. These meetings evaluate existing institutional policies, standards, procedures, guidelines, and manuals relating to laboratory animal care and use. IACUC members prepare and review written report of this program evaluation and forward it to the Institutional Official. The report includes recommendations for appropriate modifications or alterations in the program. This report is prepared and signed by a majority of the IACUC and chairperson of the IACUC.

**2. Inspect at least once every six months all of the institution's animal facilities, including satellite facilities, using the *Guide* as a basis for evaluation.** The IACUC procedures for conducting semiannual facility inspections are:

The IACUC sets the dates to conduct the semi-annual reviews of the animal care facility. The dates of program review generally coincide with the dates for review of the animal care program. On the day of the facility review, the committee meets with ACF director to receive a 30-minute report on the animal care facility, noting facility improvements, deficiencies, and plans for the future. A brief question and answer session follows the presentation. The committee then conducts a site visit of the ACF that last approximately 1.5 hours. Members are asked to comment on four areas during this room-by-room inspection of the ACF:

- 1) General concerns including handling of sharps disposal, anesthetic use, gas cylinder immobilization.
- 2) Animal husbandry, including animal identification, adequacy of feeding, sanitation, and overcrowding.
- 3) Veterinary care, including animal health status, pre-surgical and post-surgical care.
- 4) Physical plant concerns including heating, ventilation, and air conditioning, storage facilities, and physical plant structures such as the condition of the doors, walls, floors, and lights.

Each of the four categories above is assessed as being either acceptable, minor deficiency, or significant deficiency. A significant deficiency is a deficiency that threatens to the animal's or human's health and safety. The checklist for this survey is below. The members are asked to submit their reports to the IACUC executive secretary no later than two weeks after the site visit.

Concurrent with the inspection of the members also inspect PI laboratories. That inspection entails an examination the five areas below.

- 1) Personnel qualifications and training. For example, have personnel been adequately trained to work with the species used?
- 2) Occupational health. Do lab personnel know which Category 1 or 2 applies to their protocol?
- 3) Surgery. Does PI have animal surgery records including postoperative care for all survival surgeries?
- 4) Drug storage and control. Does PI have a safe, secure, storage arrangement for all drugs used in animals?
- 5) Animal husbandry. Is the laboratory in which the animals are used neat and clean?

The criteria for evaluating PIs' laboratories are the same as the criteria for evaluating the animal care facility: acceptable, minor deficiency, or significant deficiency; The checklist for inspections of PIs' laboratories is below.

After the site visit, the committee meets to discuss the site visit. The IACUC executive secretary records the minutes of this discussion. IACUC members then finalize their checklists and write brief reports that they send to the IACUC Executive Secretary no later than two weeks after the site visit. The Executive Secretary and IACUC chair then compile a single written report that is reviewed, approved, and signed by a majority of IACUC members before it is submitted to the Institutional Official.

<b>Meharry Medical College Animal Care Facility Semi Annual Inspection Checklist</b>				
<b><u>General Concerns:</u></b> 1. Drugs 2. Storage 3. Sharps Disposal 4. Anesthetic 5. Gas Cylinder  Immobilization	<b><u>Animal Husbandry Concerns:</u></b> 6. Feeding 7. Sanitation 8. Housing 9. Animal Identification	<b><u>Veterinary Care:</u></b> 10. Health Status 11. Anesthesia 12. Analgesia 13. Pre-Surg Care 14. Post-Surg Care	<b><u>Physical Plant:</u></b> 15. HVAC 16. Drainage 17. Storage 18. House-keeping 19. Doors 20. Walls 21. Ceilings 22. Lights 23. Floors	<b><u>Additional comments</u></b>
<b>ROOM #</b>	<b>ANIMAL HUSBANDRY</b>	<b>VETERINARY CARE</b>	<b>PHYSICAL PLANT</b>	
B201: Conference Room	A M S	A M S	A M S	
B209: Veterinary Operating Room Lab	A M S	A M S	A M S	
B210: Laboratory	A M S	A M S	A M S	
B211: Surgery	A M S	A M S	A M S	
B212: Surgery Prep Room	A M S	A M S	A M S	
A = Acceptable      M = Minor Deficiency S = Significant Deficiency (is or may be a threat to animal health or safety)				

<b>Meharry IACUC Semiannual Program Review of PI Laboratories</b>			
<b>Date:</b>	<b>Location:</b>		
<b>1. Personnel Qualifications and Training</b>	A	M	S
Has personnel i.e., PI, technicians, students been adequately trained to work with the species used?			
<b>2. Occupational Health Program</b>			
Do lab personnel know which Category (I or II) applies to their protocol?			
Have personnel been adequately trained in zoonoses, hazards, pregnancy/illness/immunosuppression precautions?			
Does laboratory have a first aid kit?			
Has PI made provisions for sharps disposal?			
<b>3. Surgery</b>			
Does PI have animal surgery records including postoperative care for all survival surgeries?			
Is PI using procedures for monitoring surgical anesthesia and analgesia?			
Is PI using aseptic procedures for survival surgery?			
Does PI have equipment for using/scavenging volatile anesthetics			
<b>4. Drug Storage and Control</b>			
Does PI have safe, secure, storage arrangements for all drugs used in animals?			
Does PI have procedures to ensure that drugs used in survival procedures are with expiration date?			
<b>5. Animal husbandry/Operating room</b>			
Is the laboratory in which the animals are used, reasonably neat and clean?			
Are effective contamination control procedures in place?			
Are warning signs posted where needed?			
Does PI have effective cleaning procedures/dedicated tools?			
Does HVAC system meet <i>Guide</i> requirements?			
A = acceptable; M = minor deficiency; S = significant deficiency (is or may be a treat to animal health or safety).			

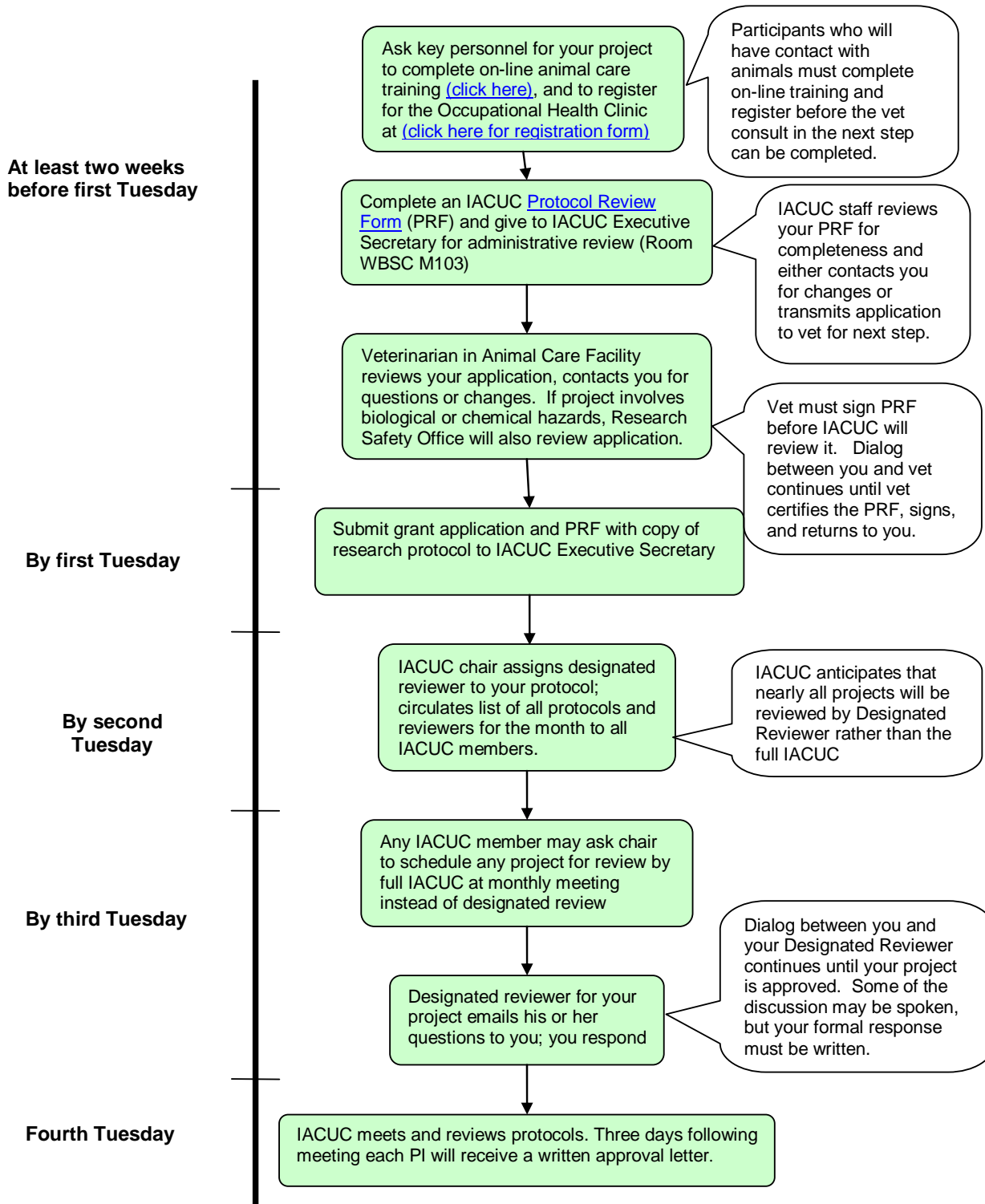
**3. Prepare reports of the IACUC evaluations as set forth in the PHS Policy at IV.B.3. and submit the reports to the Institutional Official.** The IACUC process for developing the reports and submitting them to the Institutional Official is described above. After the concurrent site visits to the Animal Care Facility and PIs' laboratories, the committee meets to discuss the site visit. The IACUC executive secretary records the minutes of this discussion. IACUC members then finalize their checklists and write brief reports that they send to the IACUC Executive Secretary no later than two weeks after the site visit. The Executive Secretary and IACUC chair then compile a single written report using OLAW's sample format. After this is reviewed and signed by a majority of the IACUC members, it is submitted to the Institutional Official.

**4. Review concerns involving the care and use of animals at the institution. The IACUC procedures for reviewing concerns are described below.**

Faculty, students and staff are encouraged to report concerns of animal abuse to ACF director, associate director of the ACF or IACUC chairman. This policy is posted in various places in the ACF. Included in the notice is a statement that the reports of animal abuse will be kept confidential; in addition, the college protects any individual expressing a concern about the care and use of animals from reprisal. If a reported abuse cannot be resolved both the ACF director and staff may refer it to the IACUC. The IACUC considers the matter either in a specially called meeting or in a regular monthly meeting. Measures that may be taken by the IACUC includes special training for ACF users and withdrawal of the IACUC approval. The ACF director has full authority to deny access of laboratory personnel to animals when the welfare of animals is in jeopardy. If the problem cannot be resolved at this level then IACUC seek remediation through the Institutional Official and OLAW if necessary. The IACUC, through the Institutional Official, will promptly report to OLAW in the event of serious or continuing noncompliance with PHS policy, serious deviations from the Provisions of the *Guide*, and any suspension of activity by the IACUC.

**5. Make written recommendations to Associate Vice President for Research regarding any aspect of the institution's animal program, facilities, or personnel training.** The principal means by which the IACUC provides written recommendations to the Institutional Official are through the two semiannual reports and the annual report.

6. Review and approve, require modifications in (to secure approval), or withhold approval of those activities related to the care and use of animals as set forth in the PHS Policy at IV.C. The IACUC procedures for protocol review are summarized in the figure on the next page.



**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 as set forth in the [PHS Policy](#) at IV.C.** The IACUC procedures for reviewing proposed significant changes in ongoing research projects are shown below:

#### **IACUC Minor and Major Modification Policy**

**This policy is to assist principal investigators who want to amend an already approved IACUC protocol.**

**MINOR MODIFICATIONS** include, but are not limited to:

- Change of funding source
- Change in strain or source of animals (change to transgenic animals will be considered as a major modification)
- An increase of less than 10% in the number of large animals such as rabbits, dogs, or swine
- An increase of less than 10 animals in the number of rodents

Minor modifications to protocols may be submitted via memo from the principal investigator and may be reviewed administratively, and then approved by the IACUC.

**MAJOR MODIFICATIONS** are proposed significant changes, which include, but are not limited to:

- Changes in personnel
- Transfer of animals (Form located on the Meharry's website)
- Change in procedure/manipulations
- Addition of procedures/ manipulations
- Change in drugs/compounds administered
- Addition of drugs/compounds administered (except for those protocols in which the PI is required to submit this information as it is received from the sponsoring agency; i.e. drug trials)
- Change in method of euthanasia
- Change in duration, frequency, or number of procedures performed on an animal
- Change of species or change in strain to a transgenic animal
- An increase in more than 10% in the number of large animals such as rabbits, dogs, or swine
- An increase in more than 10 animals in the number of rodents

For major modifications the PI submits a written request to the IACUC Executive Secretary with a signed cover memo outlining the proposed change(s). Major modifications protocols will receive a designated review as described in the IACUC's protocol review cycle. At the discretion of the IACUC reviewer, principal investigators may be required to submit a complete, revised Protocol Review Form rather than an amendment memo or modified Transfer of Animals Form before approval can be considered.

Neither minor nor major modifications can be applied to work in progress until the IACUC has approved the changes. For further information, please contact the Institutional Animal Care Program Executive Secretary at 615-327-6703 or [IACUC@mmc.edu](mailto:IACUC@mmc.edu) .

**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 as set forth in the [PHS Policy](#) at IV.C.4.** The IACUC procedures to notify investigators and the institution of its decisions regarding protocol review are described below.

Once a protocol is approved, the investigator is notified in writing by a letter signed by the IACUC Chair. A copy of the letter is also sent to the Animal Care Facility. If the approved protocol is funded by a sponsor that requires approval of animal care and use procedures, such

as NIH or the NSF, a second letter is written to the appropriate agency official and is given to the investigator for mailing to the agency.

If a protocol requires modification, the designated reviewer or IACUC executive secretary will notify the investigator and request a response to the IACUC's concerns before the protocol is approved. Work cannot begin on a protocol until the project is approved by the IACUC.

**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 in accordance with the PHS Policy at IV.C. 1-4. at least once every three years.** The IACUC procedures for conducting continuing review are described below.

Protocols that have been approved by the IACUC must be renewed on an annual basis. Approximately 11 months after issuance of an approval, the IACUC executive secretary generates an Annual Review form and emails it to the PI; the one-page form asks the PI to report briefly on animal usage, and to certify that the procedures being employed still conform exactly to the ones the IACUC approved at the previous review. The PI completes the annual review form and emails it back to the executive secretary. After the investigator completes the annual review form and returns it to the executive secretary the protocol is reviewed by designated review, provided that no IACUC member requests a full committee review. If major changes are anticipated, the investigator must submit a new protocol review form describing those changes. Such changes must be approved by the IACUC in the normal fashion before the approval will be extended.

As required by the PHS Policy on the Humane Care and Use of Laboratory Animals, a new review of all animal protocols occurs once every three years. For this review, the PI completes a new Protocol Review Form, and the project is reviewed by the same procedure that applies to new reviews.

**10. Be authorized to suspend an activity involving animals as set forth in the PHS Policy at IV.C.6. The IACUC procedures for suspending an ongoing activity are described below.**

The IACUC may suspend an activity after review of the matter at a convened meeting of a quorum of the IACUC and with the suspension vote of a majority of the quorum present.

If the IACUC suspends an activity involving animals, the Institutional Official in consultation with the IACUC reviews the reasons for the suspension, takes appropriate corrective action, and reports that action with a full explanation to OLAW

**E. The individual(s) authorized by this institution to verify IACUC approval of those sections of applications and proposals related to the care and use of animals is**

Peter J. Dolce, Ph.D.  
Associate Vice President for Research

**F. The occupational health and safety program for personnel who work in laboratory animal facilities or have frequent contact with animals is described below.**

Before the IACUC approves a protocol, all the participants in the project who have frequent contact with animals must register with the Occupational Health Service and receive hepatitis vaccination or waive this vaccination in writing. All participants in a given project must

complete these steps before the IACUC reviews the project. Participants may receive additional tests or vaccinations, depending on the nature of their experimentation or work. For example, Animal Care Facility employees who are in daily contact with animals for many hours at a time receive an extensive battery of vaccinations and provide base line serum samples. Similarly, employees who work with human pathogens may be asked to provide baseline serum samples or to receive vaccinations.

Employees who experience animal bites or other accidents with animals proceed directly to the Occupational Health Clinic for treatment.

All employees involved in animal research also participate in an annual workshop on safety that covers chemical and biological safety as well as safety concerns in animal research. In addition, the Environmental Safety Office conducts periodic required workshops on biological, chemical and radiation safety.

**G. The total gross number of square feet in each animal facility (including each satellite facility), the species of animals housed therein and the average daily inventory of animals, by species, in each facility is provided in the attached table. Meharry has no satellite facilities.**

**H. The training or instruction available to scientists, animal technicians, and other personnel involved in animal care, treatment, or use is described below.**

Meharry provides three levels training for the IACUC, faculty, animal care technicians, students, and other personnel involved in animal care, treatment or use.

The Core Program: Principal investigators and employees whose work requires contact with animals must complete this training covering the topics in 9 CFR 2.32., Part 2, Subpart C section 2.32 (c), including humane methods of experimentation; basic needs of each species; handling pre and post procedure care; aseptic surgical methods and procedures; anesthetics, analgesics, and tranquilizers; and and techniques fro limit animal use. This is accomplished by having investigators complete the on-line training offered by VA's Office for Research and Development. This online website ( <http://www.researchtraining.org/> ) provides web courses, examinations, and documentation.

Species Specific Training. The IACUC and ACF staff are provide additional training using written modules, biomethodology tapes, and other audio-visual materials from MTM Associates of Bethesda, MD. The biomethodology series covers the handling, husbandry, and biology of a particular species or species group. Training opportunities are scheduled as needed. Tapes, written modules and audio-visual aids are available in the ACF Conference Room.

Special Procedures. Animal users employing specialized procedures (e.g., surgery, implantations, etc.) are required to demonstrate proficiency in these procedures or obtain training from the ACF veterinarian or his designee before working on animals.

Whenever a new protocol is submitted or an existing protocol undergoes annual review, each new laboratory support person (i.e. post-docs, students, and technicians) is required to complete on-line training. These persons are also required to participate in an appropriate species-specific training led by the PI or college veterinarian. All persons connected with a give project must complete appropriate training before a protocol is reviewed by the IACUC.

#### IV. INSTITUTIONAL STATUS

As specified in the PHS Policy at IV.A.2., as Category 1, all of this institution's programs and facilities (including satellite facilities) for activities involving animals have been evaluated and accredited by [The Association for Assessment and Accreditation of Laboratory Animal Care International](#) (AAALAC). All of this institution's programs and facilities (including satellite facilities) for activities involving animals have also been evaluated by the IACUC and will be reevaluated by the IACUC at least once every six months, in accord with IV.B.1. and 2. of the PHS Policy, and reports prepared in accord with IV.B.3. of the PHS Policy.

All IACUC semiannual reports will include a description of the nature and extent of this institution's adherence to 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 evaluations will be submitted to Associate Vice President for Research. Semiannual reports of IACUC evaluations will be maintained by this institution and made available to the Office of Laboratory Animal Welfare (OLAW) upon request.

#### V. RECORDKEEPING REQUIREMENTS

A. This institution will maintain for at least three years:

1. A copy of this Assurance and any modifications thereto, as approved by 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 given or withheld.
4. Records of semiannual IACUC reports and recommendations (including minority views) as forwarded to Associate Vice President for Research.
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 three 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. At least once every 12 months, the IACUC, through the Institutional Official, will report in writing to OLAW:

1. Any change in the status of the institution (e.g., if the institution becomes accredited by [AAALAC](#) or AAALAC accreditation is revoked), any change in the description of the institution's program for animal care and use as described in this Assurance, or any changes in IACUC membership. If there are no changes to report, this institution will provide OLAW with written notification that there are no changes.

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RJD 5/31/07

2. 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 Associate Vice President for Research

B. The IACUC, through the Institutional Official, will provide the OLAW promptly 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 shall include any minority views filed by members of the IACUC.

## VII. INSTITUTIONAL ENDORSEMENT AND PHS APPROVAL

### A. Authorized Institutional Official

Name: Peter J. Dolce

Title: Associate Vice President for Research

Address: 1005 Dr. D.B. Todd Nashville TN 37208-3599

Phone: 615-327-6225

Fax: 615-327-6144

Signature:

*Peter J. Dolce*

Date: 5/31/07

### B. PHS Approving Official

Name: C **Eileen M. Morgan-Senior Assurance Officer**

Title: Div **Division of Assurances, OLAW**

Address: **RKL1, Suite 360-MSC 7982**

MD 2089 **6705 Rockledge Drive**

Phone: 301 **Bethesda, MD 20892-7982**

Signature:

*Eileen M. Morgan* Date: 6/15/07

C. Effective Date of Assurance:

*June 5, 2007*

D. Expiration Date of Assurance:

*June 30, 2011*

<b>Membership of the Institutional Animal Care and Use Committee</b>			
<b>Name of Institution: Meharry Medical College</b>			
<b>Assurance Number:A3420-01</b>		<b>Date: 4/11/07</b>	
<b>Chairperson Name, Title, and Degree/Credentials</b>	<b>Business Address, Phone, Fax, and E-mail of Chairperson</b>		
Name: Dr. Darryl B. Hood	Address: 1005 D. B. Todd Blvd. Nashville, TN 37208		
Title: Professor, Neurobiology, Neurotoxicology			
Degree/Credentials: Ph.D	Phone:615-327-6358	Fax:615-327-6632	Email:dhood@mmc.edu
<b>Name of Member/Code*</b>	<b>Degree/Credentials</b>	<b>Position Title</b>	<b>PHS Policy Membership Requirements**</b>
Twum-Ampofo Ansah	Ph.D	Assist. Professor, Neurobiology, Neurotoxicology	Scientist
Minu Chaudhuri	Ph.D	Assistant Professor Microbial, Pathogenesis, & Immune Response	Scientist
ZhongMao Guo	Ph.D	Associate Professor Cardiovascular Biology	Scientist
Dramane Konate	M.S.	Radiation Safety Officer	Non-voting member
Josiah Ochieng	Ph.D.	Professor Cancer Biology	Scientist

Reavis L. Mitchell Jr.	Ph.D.	History Chair Fisk University	Nonscientist
Wanda Banks Scott	M.S.	Retired English Teacher	Non Affiliated
Cynthia Tilghman- Lee	D.V.M	Attending Veterinarian	Veterinarian
Aramandla Ramesh	Ph.D.	Professor Cancer Biology	Scientist
Lisa Jones Rembert	M.S.	Executive Secretary, IACUC	Non-voting member

\* 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.

**\*\* - [PHS Policy](#) Membership Requirements:**

- Veterinarian* - a veterinarian with direct or delegated program responsibility
- Scientist* - a practicing scientist experienced in research involving animals
- Nonscientist* - a member whose primary concerns are in a non-scientific area (e.g. ethicist, lawyer, member of the clergy)
- Nonaffiliated member* - a member who is not affiliated with the institution in any way other than as a member of the IACUC, and who is not a member of the immediate family of a person who is affiliated. 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 attending veterinarian may not be considered non-affiliated.

NOTE: Non voting members must be so identified.

<b>Facility and Species Inventory</b>			
<b>DATE:4/11/07</b>			
<b>NAME OF INSTITUTION: Meharry Medical College</b>			
<b>ASSURANCE NUMBER: A34320-01</b>			
<b>Laboratory, Unit, or Building*</b>	<b>Gross Square Feet (including service area)</b>	<b>Species Housed in Unit (use complete common names)</b>	<b>Approx. Average Daily Inventory</b>
Animal Care Facility	24,671sq.ft.	Mice	35.8
		Rats	4.8
		Rabbits	0.03
		Swine	0.05
		Guinea Pigs	0.42

\*Institutions may identify animal areas in any manner, e.g., initials, ID number, etc. However, the name and location must be provided to OLAW upon request.