

Procedure: IACUC-47
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**UC Davis
Institutional Animal Care and Use Committee (IACUC)**

Title: *Clinical Veterinarian Authority*

I. Purpose:

This document clarifies the authority of the clinical veterinarians at the University of California, Davis who are responsible for the clinical care of teaching and research animals. For the purposes of this document the clinical veterinarian is defined as the Attending Veterinarian (AV) or designee (such as veterinary staff from Campus Veterinary Services, California National Primate Research Center, VMTH Field Service, or others as approved by a Memorandum of Understanding).

II. Background:

The clinical veterinarian has the authority per the USDA Animal Welfare Act (AWA), the Institute for Laboratory Animal Research *Guide for the Care and Use of Laboratory Animals (The Guide)*, and in compliance with AAALAC guidelines to provide adequate veterinary care.

The AWA states, *"Each research facility shall assure that the attending veterinarian has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use."*

The Guide states, "The institution must provide the AV with sufficient authority, including access to all animals, and resources to manage the program of veterinary care." and "there should be a timely and accurate method for communication of any abnormalities in or concerns about animal health, behavior, and well-being to the veterinarian or the veterinarian's designee...For animals on research protocols, the veterinarian or veterinarian's designee should make every effort to discuss any problems with the principal investigator or project director to jointly determine the most appropriate course of treatment or action." The Guide also states "...if the investigator and veterinary staff cannot reach consensus on treatment, the veterinarian must have the authority, delegated by senior administration and the IACUC, to treat the animal, remove it from the experiment, institute appropriate measures to relieve severe pain or distress, or perform euthanasia if necessary."

III. **Policy:**

All clinical veterinarians responsible for the veterinary care of teaching and research animals have the authority to treat any animal that needs immediate care to preserve life or alleviate pain, which may include euthanasia. IACUC-approved exceptions may include projects with death as an endpoint or unalleviated pain/distress or deviations from policy IACUC-28 “Humane Endpoints for Laboratory Animals”.

The clinical veterinarian or veterinary designee will make a reasonable effort to contact the principal investigator, or the alternate contact listed on the approved animal protocol prior to administering analgesics, antibiotics, diagnostics, treatments, or euthanasia. It is important for investigators to promptly respond to all clinical veterinary communications and to ensure that their contact information listed on animal protocols is current. If the animal is deemed stable by the clinical veterinarian, then a plan for further monitoring or intervention (e.g., implementing analgesics, antibiotics, diagnostics) as needed will be instituted.

Upon finding a sick or injured animal, husbandry or laboratory staff will notify the appropriate clinical veterinary service specified in the Animal Care and Use Protocol. The animal will then be assessed by a clinical veterinarian or veterinary designee who may then euthanize an animal found to be moribund or in severe pain or distress after attempting to contact the investigator or the alternate contact.

IV. **Resources:**

1. Animal Welfare Act and Regulations
<https://www.nal.usda.gov/awic/animal-welfare-act>
2. ILAR, Guide for the Care and Use of Laboratory Animals
<http://nap.edu/12910>
3. Lab Animal 2015; 44(01), “Response to Protocol Review Scenario: Veterinarian’s Responsibilities”
<https://www.nature.com/articles/lab.670>
4. IACUC-28 “Humane Endpoints for Laboratory Animals”
<https://research.ucdavis.edu/wp-content/uploads/IACUC-28.pdf>
5. PHS Policy
<https://olaw.nih.gov/policies-laws/phs-policy.htm>