Policy: SC-40-100
Date: 6/9/2025
Enabled by: IACUC/AV/

ILAR/APHIS

Supersedes: 4/1/2022

Title: Animal Care Program Veterinary Care Policy

I. <u>Purpose</u>:

The purpose of this policy is to explain the delegations and responsibilities of personnel providing veterinary care at UC Davis. This policy covers research and teaching animals in the animal care and use program.

II. Policy:

The Institute for Laboratory Animal Research of the National Research Council, in its *Guide for the Care and Use of Laboratory Animals* (the Guide), defines the Attending Veterinarian (AV) as the veterinarian responsible for the health and well-being of all laboratory animals used at an institution. It states, "The institution must provide the AV with sufficient authority including access to all animals, and resources to manage the program of veterinary care. The AV should oversee other aspects of animal care and use (e.g., husbandry, housing) to ensure that the Program complies with the Guide."

The Federation of Animal Sciences Society's *Guide for the Care and Use of Agricultural Animals in Research and Teaching* states, "The agricultural animal health care program is the responsibility of the attending veterinarian."

United Sates Department of Agriculture's Animal Welfare Act and the Public Health Service policy also require that the AV have the authority to oversee the adequacy of other aspects of animal care and use, including animal husbandry and nutrition, sanitation practices, zoonosis control, and hazard containment.

AAALAC has the following position statement regarding the attending veterinarian: "The Attending Veterinarian or other equivalent veterinary position, hereafter abbreviated as AV, is responsible for the welfare and clinical care of animals used in research, testing, teaching, and production. For the purposes of this Position Statement, the term "AV and/or designee(s)" is used below to recognize that responsibilities are often carried out by a team of individuals, and not solely the AV; however, AAALAC considers the AV to be the individual with primary oversight and authority."

The American College of Laboratory Animal Medicine states the following regarding veterinary authority: "The veterinarian must have the authority to alter the clinical care plan if unexpected pain or distress occur, in cooperation with the research team. The IACUC should review these types of unexpected outcomes as part of the post-approval

monitoring process and require changes to methods of pain management in protocols, as needed."

In order to achieve veterinary oversight of such a large and diverse campus as UC Davis, delegations for immediate clinical care and herd health have been made to the VMTH Field Service, the California National Primate Research Center veterinary staff, and other campus and off-site veterinarians as approved by the AV and IACUC.

To comply with the above referenced regulations and guidelines, the UC Davis AV is the UC Davis Official responsible for the health and welfare of the teaching and research animals at the university and at its off-site facilities.

III. Procedure:

- Each vivarium must develop an SOP/process to record sick and dead animals and report these findings to Campus Veterinary Services (CVS) or a designated clinical veterinarian.
- Each vivarium may maintain an SOP that allows husbandry staff to perform initial treatments and monitoring for minor health conditions (i.e. ulcerative dermatitis and malocclusion in rodents) in consultation with their designated clinical veterinarian.
- Lab and facility personnel that are to be performing health monitoring and treatments must be trained by veterinary staff or their trained designee, and this training must be documented and available for review by IACUC staff.

Delegation of Veterinary Care: The AV approves areas of responsibility and delegates primary clinical and herd health management to various designated services. The three main delegates are Campus Veterinary Services CVS (which reports to the AV) for the majority of traditional laboratory animal species, the VMTH Field Service for agricultural species, and the California National Primate Research Center veterinary staff for nonhuman primates housed at the primate center.

Some protocols include specialization of species or locale and thus utilize veterinarians not from the three main services listed above. The veterinarian of record is named in the animal use and care protocol. A specialized program of veterinary care is described in the protocol via MOU then reviewed and approved by the AV and IACUC prior to authorization of provision of care.

Designated veterinarians must notify the UC Davis AV or designee by phone or e-mail of any significant animal health concerns resulting from an animal care and use protocol and/or a significant spontaneous herd or colony health problem occurs.

Animal Procurement and Transportation: All applicable federal, state, and local laws and regulations must be followed when obtaining and transporting animals. Purchase and shipping records must be retained. To maintain the biosecurity of the laboratory animal colonies, animals must be purchased from the Approved Vendors or if not available, from a supplier that has been approved by CVS or designee via the online animal

tracking system and prior to shipment. Selection of vendors for agricultural animals, nonhuman primates, and other non-traditional species should involve clinical veterinarians and other staff to ensure a high level of animal health. Animals may only be procured if they are linked to an approved IACUC protocol.

Preventive Medicine Programs: Disease prevention is the cornerstone of maintaining healthy animals and limiting variables in their environment that may interfere with research. Some of the aspects of an effective preventive medicine program include adequate animal biosecurity procedures to prevent the introduction of unknown diseases; provisions for quarantine and stabilization; implementation of disease surveillance programs including investigations of unexpected deaths; procedures to minimize stress during handling and restraint; zoonosis prevention; etc.

Sick, Injured and Dead Animals: It is the responsibility of everyone working with animals at UC Davis to report any sick or injured animals to the appropriate veterinary service, clinical veterinarian or designee. Reporting must be timely and accurate. Records of the diagnosis, testing, delivery of medical treatments, and final resolution must be maintained by the facility or veterinary service. Assurance of compliance with study and humane endpoints is very important and recurrent or significant problems should be communicated to the IACUC. Unexpected deaths, unexpected or increased mortality must be documented and investigated as potential sources of infection or possible research complication.

The UC Davis AV has the authority to immediately suspend an activity that causes significant animal welfare or health concerns. The Attending Veterinarian will immediately notify the IACUC of any such situation.

Medical Records: Documentation of provision of adequate veterinary care is required. In addition to records of sick and injured animals, individual and herd/colony animal records must be maintained for behavioral abnormalities, prophylactic treatments and diagnostic tests including rodent sentinel testing, pre-, peri-, and postsurgical procedures, documentation of euthanasia, etc. Group health records are acceptable for non-USDA covered animals maintained as a cohort. All entries must indicate the animal's ID, originator of the entry, and date. Medical records are retained for a duration specified in the AV Standard of Care 40-404.

Surgical Procedures and Postsurgical Care: There are many factors contributing to successful surgical outcomes; appropriate training on good surgical technique is crucial. No one is allowed to perform surgery without demonstrating they are proficient in performing the specific techniques with the specified species in their approved protocol. An online course is required by the IACUC for rodent surgeons.

Pre-surgical planning is necessary to ensure all procedures, from before the start of surgery through patient recovery and suture removal, are performed at a high level of efficiency to minimize or eliminate pain or distress. All surgeons, surgical facilities and procedure rooms must be approved by the IACUC prior to first use and inspected minimally semi-annually thereafter. Clinical veterinarians should be consulted, as needed, to assist with all aspects of performing surgical procedures to maintain high standards.

Pain and Distress: Prevention, Recognition, and alleviation of pain and distress are important and integral responsibilities for everyone working with animals. Since recognition of early signs of pain can be difficult, especially in stoic animals, training in the recognition of species-specific signs of pain is crucial. In general, we assume that a procedure that causes pain in humans will also cause pain in animals. Preemptive analgesics or anesthesia should always be given before a procedure is performed that is expected to cause more than minor momentary pain, unless medically contraindicated or if IACUC exempted based on scientific necessity. If unanticipated pain that is more than momentary is recognized, relief of pain must be initiated promptly.

Consideration for minimizing the duration and intensity of distress is important when caring for animals and when planning the use of animals on a protocol. Humane use of animals dictates minimizing or eliminating factors that lead to distress. In addition, distress can cause significant physiological alterations which may negatively impact research outcomes.

Euthanasia: Unless an IACUC exemption is given for scientific reasons, the methods for euthanasia for all species should be consistent with the most current edition of the *AVMA Guidelines on Euthanasia*. Selection of agents is based on such factors as the species, animal's age, scientific objectives, agents and equipment available, and most importantly, inducing rapid unconsciousness without pain and distress. It is very important to be trained in delivery of the methods of euthanasia, especially for physical methods of euthanasia. Individuals who will be using physical methods of euthanasia on conscious animals must first be trained and then be certified by a campus approved designated trainer as proficient. Euthanasia of animals for experimental purposes must comply with methods described in the IACUC-approved protocol. Animals euthanized for medical reasons or as culls must be euthanized following the AVMA recommendations and IACUC approved policies.