General Vertebrate Animal Information

*Information Regarding Veterinary Care for Campus Animals*

The Oregon State University Research Office employs Helen E. Diggs, MEd, DVM, DACLAM (80% effort) as Attending Veterinarian and Laboratory Animal Resources Center (LARC) director for the campus animal care and use program. Tim Miller-Morgan, DVM (0.5% effort) and Campus Clinical Veterinarian, Jennifer Sargent, DVM (75%effort) are employed by the LARC to assist Dr. Diggs with veterinary care responsibilities. The College of Veterinary Medicine (CVM) Rural Veterinary Practice (RVP) clinicians rotate through a 24-hour on-call cycle and provide immediate veterinary care to all campus agricultural animals. Private practice practitioners, Terry McCoy, DVM and Masie Curtis, DVM are on-call for immediate veterinary care of agricultural animals at eastern Oregon animal facility sites. Campus back-up veterinary care is provided as needed by Jill Parker, VMD, DACVS, Large Animal Surgeon. Veterinary concerns identified by facility or research staff are reported to the appropriate veterinarian for treatment. All daily animal observations and health reports are logged on the online Daily Animal Health Reporting System that is monitored by the Attending Veterinarian or her designee. For research collaborations that involve animal work conducted at other institutions Memorandums of Understanding are in place to guarantee appropriate oversight of animals. Details of all collaboration or housing agreements are included in the Animal Care and Use Protocol and approved by the Institutional Animal Care and Use Committee (IACUC).

Laboratory animals are ordered and received from selected vendors by the LARC. Vendor animal health surveillance reports are reviewed and approved by the veterinary staff prior to animal ordering and animals are inspected upon receipt. Generally, agricultural animals are provided for research and instruction from in-house herds or flocks (beef/dairy cattle, swine, sheep, and poultry). Aquatic and ectothermic species originate from in-house breeding colonies or may be wild-caught.

Animals are housed in managed animal facilities by species and according to research or teaching use. Acclimation periods prior to use are described in the animal protocol and, with an exception for agricultural animals on mountainous pastureland, daily health observations are required. Individual animal or herd/flock health reports are reviewed by the veterinary staff and maintained on file in the appropriate animal facility.

All emergency contact information is prominently posted in each animal facility. This includes 24-hour contact with Facilities Services and Public Safety. Communication with the AV or investigator is via phone, text, email or the online a Daily Health Reporting System.

The Animal Health Surveillance Program includes regular animal health testing and utilizes the diagnostic services of the CVM Veterinary Diagnostic Laboratory (VDL) and a commercial testing laboratory. Biosecurity procedures are in place and strictly followed to minimize the incursion of adventious, deleterious or infectious pathogens to campus animal colonies. Diagnostic imaging modalities are available at the CVM Veterinary Teaching Hospital (VTH) and include radiology, ultrasound, MRI, endoscopy and computed tomography scanning.

All surgical procedures to be performed on research or teaching animals must be approved by the IACUC in the animal protocol. The animal protocol requires details of the surgery including participants’ training and experience and animal anesthesia, intra-operative and postoperative care, monitoring and analgesia. Survival surgery on USDA-covered species is performed in dedicated surgical suites or sites typical for agricultural animals. Surgical consultation and training for investigators and research associates is performed and documented by LARC veterinarians or veterinary technicians depending on the needs of the research staff or as requested or required as a condition of animal protocol approval. Pharmaceutical agents and supplies required for animal care, medical or surgical procedures are purchased by the LARC veterinary staff from commercial vendors or from the CVM Pharmacy.

All animal protocols are reviewed by the AV or her veterinary designee as part of the IACUC review process. The AV and other LARC veterinarians are available to consult with investigators concerning any aspect of protocol design or animal care and use.

Attention to the 3 R’s is encouraged throughout the animal use process, from initial design to study competition. Pilot studies for new procedures are encouraged to assist investigators in determining ability to accomplish the proposed experiments and gain valuable advanced experience in procedural capabilities and animal response.

*Minimization of Pain and Distress (Vertebrate Animals Section)*

The IACUC uses the USDA Pain Category Classifications to designated anticipated levels of animal pain and distress. The veterinary staff and Principal Investigators observe levels of pain or distress during and after procedures. Requests for pain category changes may be presented to the IACUC as appropriate. The approved animal protocol outlines humane endpoints and early animal removal/intervention criteria for each study. Intervention criteria for the relief of pain and distress are required for all protocols. The AV has final authority if an animal must be removed from a study, treated, or euthanized. Post-approval monitoring, adverse event reporting and veterinary oversight of approved projects assures the IACUC that animal pain and distress is being appropriately monitored, assessed and alleviated as necessary.

*Method of Euthanasia (Cover Page Supplement/PHS Fellowship Supplement Form)*

Euthanasia may be planned and necessary at the end of a protocol or as a means to relieve pain or distress in an animal. Study endpoints and humane endpoints are described in protocols and set by the veterinarian and the investigator in collaboration to ensure that whenever possible animal pain and distress is prevented.

Unless a deviation is justified for scientific or medical reasons and approved by the IACUC, euthanasia methods are consistent with the AVMA Guidelines on Euthanasia (Edition 2013).