**Satellite Facility Location Housing Standard Operating Procedures**

***Small Mammal Species Housing SOP***

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| --- | --- | --- | --- |
| **Principal investigator:** |  | **Protocol number(s):** |  |
| **Location (building and room):** |  | **Species:** |  |
| **Maximum days in this location:** |  | **Date approved:** |  |
| **Individuals responsible for care:** |  | | |

**Procedures for Quarantine:** *If species are obtained with uncertain health status (i.e., from the wild), describe how they will be housed (i.e., separate cages, duration of separate housing) and monitored to ensure that the newly acquired animals will not transmit diseases to animals already in the PI lab. If no quarantine is necessary, write “No quarantine required”.*

**Transportation:** *Describe how the animals will be transported (i.e., from UAC or from the field) to the satellite location.*

**Personal Protective Equipment (PPE):** *Describe any PPE that must be used when handling the animals. N-95 masks are recommended to ensure protection from rodent allergens. If no PPE is necessary, write “No PPE required”.*

**Description of Housing**: *Briefly, provide a description of the housing in the satellite facility location. How are animals housed? (i.e., single housed or in groups of 2-4 in micro-isolator cages with water bottles). Will caging, food, water and bedding be procured through University Animal Care?*

**Notification Prior to Housing in Satellite Facility:** For new satellite facilities or satellite facilities where animals are housed only periodically, the PI or their designee will notify UAC and the AWP **prior** to housing new animals.

* Notification to UAC via email: [UAC-Vets@email.arizona.edu](mailto:UAC-Vets@email.arizona.edu) and AWP via email: [ORCR-IACUC@email.arizona.edu](mailto:ORCR-IACUC@email.arizona.edu).

**Description of Daily Monitoring (includes weekends and holidays):**

|  |  |
| --- | --- |
| **Daily Monitoring** *(Initial next to each requirement that will be performed)* | |
|  | Check and record room temperature and relative humidity (high, low, and current). |
|  | Record the time room lights are turned on and off. |
|  | Check animal health. If ill or injured animals are present, you **must** report to UAC vet staff immediately. |
|  | Check food and water levels, ensure there is at least 48 hours’ worth and add as needed. |
|  | Check the cleanliness of the cage (no flooding, etc.). |
|  | Sweep and/or wet mop as needed. Clean round the cage area as needed. |
|  | Check trash and empty trash receptacle as needed. |
|  | Record all readings and activities above on the “Daily Animal Care Assessment Log”. Initial and date the log. |

**Exceptions or changes to the daily monitoring requirements listed above:** Click or tap here to enter text.

**Description of Further Monitoring:**

|  |  |
| --- | --- |
| **Weekly** *(Initial next to each requirement that will be performed. Put N/A if not applicable.)* | |
|  | Transfer group housed rodents to clean cages with fresh bedding, water bottles/hydropacs, and enrichment items. |
|  | Dust tables and benches located in the satellite facility location. |
|  | Sweep floors. |
|  | Check light timer for appropriate function (if a timer is being used). |
|  | Record all activities above on the “Daily Animal Care Assessment Log”. Initial and date the log. |

**Exceptions or changes to the weekly monitoring requirements listed above:** Click or tap here to enter text.

|  |  |
| --- | --- |
| **Every Other Week** *(Initial next to each requirement that will be performed. Put N/A if not applicable.)* | |
|  | Transfer singly housed rodents to clean cages with fresh bedding, water bottles/hydropacs, and enrichment items. |
|  | Record all activities above on the “Daily Animal Care Assessment Log”. Initial and date the log. |

**Exceptions or changes to every other week monitoring requirements listed above:** Click or tap here to enter text.

|  |  |
| --- | --- |
| **Monthly** *(Initial next to each requirement that will be performed. Put N/A if not applicable.)* | |
|  | Wipe down tables, cabinets, and benches located in the satellite facility location with disinfectant or dilute bleach. |
|  | Sweep and mop floor with dilute bleach or disinfectant. |
|  | Evaluate the condition of the room or area (room exhaust filters, floor, roof, etc.). |
|  | Record all activities above on the “Daily Animal Care Assessment Log”. Initial and date the log. |

**Exceptions or changes to the monthly monitoring requirements listed above:** Click or tap here to enter text.

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| --- | --- |
| **Every 6 Months** *(Initial next to each requirement that will be performed. Put N/A if not applicable.)* | |
|  | Sanitize any food storage bins. Properly label the bin with food name and dates (milling, expiration, sterilization). |
|  | Sanitize the area and contents related to animal housing (i.e. carts, supply bins, trash receptacles, cage racks, and shelving units) with diluted bleach or disinfectant. |
|  | Check air ducts and vents to ensure they are not filled with hair or dust. If any problems, contact Facilities Maintenance for cleaning. |
|  | Record all activities above on the “Daily Animal Care Assessment Log”. Initial and date the log. |

**Exceptions or changes to the 6-month monitoring requirements listed above:** Click or tap here to enter text.

**Health Monitoring and Veterinary Care Plan:**

Contact:

* + UAC veterinary support can be contacted at [UAC-VeterinaryServices@email.arizona.edu](mailto:UAC-VeterinaryServices@email.arizona.edu) or [UAC-Vets@email.arizona.edu](mailto:UAC-Vets@email.arizona.edu) during business hours.
  + Contact the on‐call veterinarian as listed on the Weekend and Emergency Contact list. This should be posted in a prominent location within the satellite facility each week.

**Criteria for Moribundity:**

* Animals will be euthanized when the following clinical signs occur:
  + *Insert protocol criteria here*

**Methods of Euthanasia and Carcass Disposal:**

* Animals will be euthanized by:
  + *Insert protocol method(s) here*
* Carcasses will be disposed of by:
  + *Insert method(s) here*

**Disaster/Contingency Plan:**

* In the event of power failure or other system failure/event that jeopardizes the health and well-being of the animals, UAC must be immediately contacted so that animals can be moved. During work hours on weekdays, contact AHSC UAC: 626-6702. On weekends, holidays, or after hours contact the on-call veterinarian. If the veterinarian cannot be contacted, contact the on-call supervisor for assistance. If neither can be reached, put the animals back into the appropriate housing room. Call and leave a message at 626-6702 telling UAC of the incident and where the animals are. If an animal has been injured by the event, call the UAC veterinarian on call or perform immediate euthanasia and inform UAC of the event. Additionally, an Reportable New Information (RNI) form (<https://research.arizona.edu/compliance/IACUC/animal-welfare-concerns-reportable-new-information>) must be submitted to the AWP ([orcr-iacuc@email.arizona.edu](mailto:orcr-iacuc@email.arizona.edu)).
* If a catastrophic event incapacitates UAC facilities, the UAC Emergency Plan will be enacted.
* Assure that individuals who are responsible for the care of the animals are aware of these plans.
* Animals that must be euthanized due to emergency situations will be euthanized as described above.

**Principal Investigator Date**

**Approval signatures:**

**UAC Director or Designee Date**

**IACUC or AWP Designee Date**

# Copies of the Housing SOP will be maintained in the Satellite Facility, by University Animal Care, and attached to the approved IACUC protocol in the electronic protocol system.

***Satellite Housing will be reviewed every three years.***