
Subject: **Expired Medical Materials**
 Pharmaceutical-Grade Substances
 Surgery
 Pre- and Post- Procedural Care
 Program of Veterinary Care
 Declawing in Wild/Exotic Carnivores and
 Removal/Reduction of Canine Teeth in Wild /Exotic
 Carnivores and Nonhuman Primates
 Health Records
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References: AWA Section 2143
 9 CFR, Part 2, Sections 2.31, 2.32, 2.33, 2.40
 9 CFR, Part 3, Section 3.110

History: Replaces memoranda dated May 31, 1990; November 29, 1991;
 April 6, 1992; and September 25, 1992. Replaces policies dated
 April 14, 1997; January 14, 2000; August 18, 2006; July 17,
 2007; and March 25, 2011.

Justification: Provides requested guidance. The Animal Welfare Act (AWA)
 requires that all regulated animals be provided adequate
 veterinary care.

Policy: **Expired Medical Materials**

The use of expired medical materials (e.g., drugs, fluids, sutures, anesthetics, sedatives, or analgesics) during any survival surgical procedure on a regulated species is not considered acceptable veterinary practice and therefore not consistent with adequate veterinary care as required by the regulations promulgated under the Animal Welfare Act.

Research, Teaching, and Testing

Acute Terminal Procedures: Expired medical materials except analgesics, sedatives anesthetics, and euthanasia solutions may be used in acute terminal procedures where an animal is anesthetized during the study and euthanized without recovery if such use does not adversely affect the animal’s well-being or compromise the validity of the scientific study.

Facilities permitting the use of expired medical materials in acute terminal procedures should have a policy on the use, storage, and disposal of such materials which is in accordance with all relevant institutional, local, state, and federal requirements where applicable; and/or require

investigators to describe the intended use in the animal study proposal.

Pharmaceutical-Grade Substances

Pharmaceutical-grade substances are expected to be used whenever they are available, even in acute procedures. This includes but is not limited to: compounds, medications, drugs, vehicles, and diluents. APHIS recognizes that some substances (e.g. test articles, novel compounds, and those resulting from a compounding process) are only available as a non-pharmaceutical grade product.

Research, Teaching, and Testing:

Non- pharmaceutical-grade substances should only be used in regulated animals after specific review and approval by the IACUC. The IACUC should develop a consistent evaluation process which includes but is not limited to the scientific justification and the availability of an acceptable veterinary or human pharmaceutical-grade product.

Cost savings alone is not sufficient justification for using a non-pharmaceutical- grade substance in regulated species, however, unavailability or shortages of pharmaceutical grade substances may lead to cost increases and the IACUC may determine that this justifies the use of the non-pharmaceutical grade substitution.

Exhibitors and Dealers:

Non- pharmaceutical-grade substances should only be used in regulated animals under the approval of the attending veterinarian in accordance with accepted veterinary practice and nursing care.

Surgery

Surgery is to be performed using appropriate anesthesia in accordance with professionally accepted medical and veterinary practice. Current standards preclude food preparation, eating, drinking, or smoking in surgery areas.

Research, Teaching, and Testing:

Survival Surgery: Survival surgery is to be performed using aseptic technique under standards that are in accordance with professionally accepted medical and veterinary practice. The AWA regulations require major operative procedures on nonrodents to be performed in a dedicated surgical facility. For the purposes of this policy, a designated

surgical facility is one that is set up to be cleaned and maintained in an aseptic condition, and not used for other purposes when not in use. It must be maintained in good repair to meet aseptic requirements. Meeting rooms and auditoriums do not qualify as dedicated survival surgical facilities.

Nonsurvival Surgery: Nonsurvival surgery does not require aseptic techniques or dedicated facilities. It should be performed in a clean area, free of clutter, using acceptable veterinary sanitation practices equivalent to those used in a standard examination/treatment room. Personnel present in the area should observe reasonable cleanliness practices for both themselves and the animals.

Pre- and Post-Procedural Care

The attending veterinarian is to ensure there is adequate pre-procedural and post-procedural care in accordance with established veterinary and medical practices.

Research, Teaching, and Testing:

All animal activity proposals involving surgery must provide specific details of pre- through post-procedural care and relief of pain and distress. The principal investigator must involve the attending veterinarian or his/her designee in planning the type of care that may be provided. The appropriate use of drugs to relieve pain and/or distress should be specified in the animal activity proposal to avoid possible delays due to investigator concerns that a treatment regimen may interfere with the study. The withholding of pain and/or distress relieving measures must be scientifically justified in writing and approved by the IACUC. The specified drugs for relief of pain and/or distress must be readily available for use as described in the proposal.

The attending veterinarian retains the authority to alter post-operative care if unexpected pain and/or distress occur in an animal. In the event the attending veterinarian requests a significant change to a protocol to alter post-operative care for the remaining animals, that change must be reviewed and approved by the IACUC before the change is implemented.

In the event the animal is taken to an off-site location, such as a farm for post-operative care, that location should be identified as a site of the research facility or a site of another registered research facility in order for Animal Care (AC) to conduct an inspection. To comply with adequate veterinary care

requirements and in accordance with currently accepted standards of practice, an animal is not to be taken to an off-site location before it fully recovers from anesthesia unless justified in the animal activity proposal.

Appropriate post-operative records should be maintained in accordance with professionally accepted veterinary procedures.

Program of Veterinary Care

Research facilities, dealers, and exhibitors

Establishments which do not have a full-time attending veterinarian must have a written Program of Veterinary Care (PVC). This Program must consist of a properly completed APHIS Form 7002 or an equivalent format. The attending veterinarian must visit the facility on a regular basis, i.e., often enough to provide adequate oversight of the facility's care and use of animals. APHIS recommends this visit occur at least annually. Records of visits by the attending veterinarian should be kept to include dates of the visits and comments or recommendations of the attending veterinarian or other veterinarians.

The PVC should be reviewed and updated whenever necessary (e.g., as a new species of animal or a new attending veterinarian is obtained, or the preventive medical program changes). APHIS recommends that the PVC be initialed and dated by both the attending veterinarian and the facility representative whenever it is changed or reviewed without change. The preventive medical program described in the PVC is expected to be in accordance with professionally accepted veterinary practice (e.g., appropriate vaccinations, diagnostic testing). It should include zoonotic disease prevention measures.

Declawing in Wild /Exotic Carnivores and Removal/Reduction of Canine Teeth in Nonhuman Primates and Wild /Exotic Carnivores

Declawing of wild and exotic carnivores and the removal or reduction of canine teeth in nonhuman primates and wild and exotic carnivores have been used in the past as a means to minimize the dangers during human interaction with these species. These procedures are not innocuous and can cause ongoing pain, discomfort, or other pathological conditions in the animals. In addition, they do not safeguard the public or the animals from biting and predatory behaviors.

The declawing of any wild or exotic carnivore does not constitute

appropriate veterinary care unless prescribed by the attending veterinarian for treatment of individual medical problems of the paws. Any medical treatment should be limited to the affected digit(s) or area.

Tooth reduction that exposes the pulp cavity does not constitute appropriate veterinary care as it may result in oral pathologic conditions and pain. Reduction that does not expose the pulp cavity may be acceptable in some instances such as a behavioral study or a breeding situation.

The American Veterinary Medical Association (AVMA) has developed a policy statement on these issues that supports APHIS' recommendation. It also suggests alternatives to dental surgery such as behavioral modification, environmental enrichment, and changes in group composition. A full text of AVMA Animal Welfare Policy Statements can be found on www.avma.org.

Health Records

Health records are needed to convey necessary information to all people involved in an animal's care. Every facility should have a system of health records sufficiently comprehensive to demonstrate the delivery of adequate health care.

Traveling exhibitors: Information on any chronic or ongoing health problems and information on the most current preventive medical procedures should accompany any traveling animals, but the individual medical history records may be maintained at the home site.

Euthanasia

The method of euthanasia should be consistent with the current AVMA Guidelines for the Euthanasia of Animals:
<https://www.avma.org/KB/Policies/Pages/Euthanasia-Guidelines.aspx>.

Also note that in accordance with the "Expired Medical Materials" section of this policy, the use of expired euthanasia drugs is considered inadequate veterinary care.