

A better way to handle this situation would have been for the PI, the veterinarian and perhaps the IACUC chairperson to assess the clinical condition of the mouse together by the cage side. If a consensus could not be reached regarding euthanizing the mouse, the veterinarian could have presented this case to the full IACUC committee. In the meantime, the veterinarian could have continued to offer support to the PI. Both the PI and the veterinarian have vital roles in the success of a research project. A culture of cooperation and compassion will contribute to the satisfactory resolution of such issues.

1. Public Health Service. *Policy on Humane Care and Use of Laboratory Animals* (US Department of Health and Human Services, Washington, DC, 1986; amended 2002).
2. Institute for Laboratory Animal Research. *Guide for the Care and Use of Laboratory Animals* 8th edn. (National Academies Press, Washington, DC, 2011).
3. Silverman, J., Suckow, M.A. & Murthy, S. *The IACUC Handbook* 3rd edn. (CRC Press, Boca Raton, FL, 2014).
4. Bayne, K. & Turner, P.V. *Laboratory Animal Welfare* (Academic, London, 2014).

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RESPONSE

Veterinarian's responsibility

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The Veterinarian's Oath¹ seems to be a good starting point for this discussion: "I solemnly swear to use my scientific knowledge and skills for the benefit of society through the protection of animal health and welfare, the prevention and relief of animal suffering..." A veterinarian's first concern should be the welfare of an animal.

If an animal is suffering and moribund, then it is the veterinarian's ethical responsibility to alleviate that suffering, including, if needed, by euthanizing the animal.

Numerous organizations emphasize and reiterate that responsibility. The American Veterinary Medical Association *Guidelines for Euthanasia* discuss euthanasia and veterinary medical ethics². The American College of Laboratory Animal Medicine's statement on adequate care reads, "The veterinarian must have the responsibility and authority to assure that handling [and] euthanasia are administered as required to relieve pain and such suffering in research animals..."³. And the Association for the Assessment and Accreditation of Laboratory Animal Care International has issued a position statement titled *The Attending Veterinarian and Veterinary Care*⁴.

The responsibilities of the Attending Veterinarian (AV) are addressed in the Animal Welfare Act regulations⁵, which define the AV as the "person... who has direct or delegated authority for activities involving animals" and further states that "[e]ach research facility shall employ an attending veterinarian under formal arrangements."

Scofield's animals had a known history of dermatitis with treatment and euthanasia as recommended by the veterinary staff, and there had been no past problems with this strategy. But in this case, Scofield objected when a veterinarian recommended euthanizing a nearly moribund mouse. The attending veterinarian (AV) agreed with the veterinarian's assessment. The veterinarian chose to euthanize the mouse when its condition deteriorated. He may have acted out of compassion or on the belief that it was a reasonable action on the basis of past practices.

The *Guide for the Care and Use of Laboratory Animals*⁶ states that "overall Program direction should be a shared responsibility among the IO, AV, and IACUC" but does not indicate that each

entity must be a part of every singular decision within the animal program. Since Great Eastern has an IACUC and the investigator commented on lack of funding, it is safe to assume there is an Institutional Assurance document describing the animal care program. That document should include a description of the responsibility of the AV and his or her designees. A line of authority should be clearly delineated for all responsible parties: the Institutional Official (IO), the AV and the IACUC. This documentation would surely have made the subcommittee's investigation much easier. It would be very difficult to get all three responsible entities to meet and delegate authority to the clinical veterinarian each time a situation such as this occurs. Therefore, a written documentation of how the program will be managed in the future is crucial for good animal care and good animal research. This suggestion is in line with the emergency care section of the *Guide* addressing the need for delegated authority.

1. American Veterinary Medical Association. *Veterinarian's Oath*. <<http://www.avma.org/KB/Policies/Pages/veterinarians-oath.aspx>>
2. American Veterinary Medical Association. *AVMA Guidelines for the Euthanasia of Animals: 2013 Edition* (AVMA, Schaumburg, IL, 2013).
3. American College of Laboratory Animal Medicine. *Adequate Veterinary Care*. <<http://www.aclam.org/education-and-training/position-statements-and-reports>>
4. Association for the Assessment and Accreditation of Laboratory Animal Care International. *The Attending Veterinarian and Veterinary Care*. <<http://www.aalac.org/accreditation/positionstatements.cfm#vetcare>>
5. Animal Welfare Act Regulations. 9 CFR. Chapter 1, Subchapter A—Animal Welfare. Part 2, Regulations. (1.1; 2.33).
6. Institute for Laboratory Animal Research. *Guide for the Care and Use of Laboratory Animals* 8th edn. (National Academies Press, Washington, DC, 2011).

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