INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE
RESEARCH APPROVAL STANDARD CONDITIONS

The following standards are conditions of all protocols approved by Georgia Aquarium's IACUC. All Principal Investigators and their research teams are expected to abide by these standards. Failure to comply with these standards is likely to result in further action, including (but not limited to) withdrawal of all present and future support. All requested notifications and documentations must be sent to iacuc@georgiaaquarium.org.

COMPLIANCE

1. All activities conducted must be done so under a protocol approved by the IACUC and be conducted in accordance with the Animal Welfare Act and Animal Welfare Regulations.

2. Georgia Aquarium's Attending Veterinarian of Record must be contacted immediately if unanticipated pain or distress, unexpected morbidity, or unanticipated mortality occurs. The IACUC must be notified of all unanticipated outcomes of animal use, which can be reported using a GAI IACUC Event Report Form.

    a. Unanticipated outcomes are generally defined as negative impacts to animal welfare or well-being, or deviations from the Animal Welfare Regulations or Animal Welfare Act. This includes all animals (e.g., at GAI, animals owned by GAI but residing at collaborating institutions, animals owned by other facilities in which GAI personnel did such work, wild animals in the field.

3. Any requested changes to an approved protocol must be submitted to the IACUC using the proper forms and approval must be given prior to any activity being changed or implemented under the protocol.

TRAINING AND OVERSIGHT

4. All personnel engaging in the handling or treatment of animals related to the approved protocol may only be those listed and approved under the protocol with a completed Section G form or Liability Waiver (unless they are a qualified and therefore exempted Georgia Aquarium employee or international colleague).

5. All training required by the IACUC must be completed prior to the start of the protocol's activities and documentation of such must be sent and on file with the IACUC. Any specialized training required is noted on the approval letter and must also be completed prior to the start of any activities. Training is valid for 3 years.

6. All other Section G exempted and secondary personnel indirectly involved in the protocol (e.g., vessel operators, net holders, etc.) must sign a Liability Waiver. These Liability Waivers must be attached by the Principal Investigator to their Annual Update and/or Research Completed Form (whichever comes first).

POST-APPROVAL MONITORING

7. The IACUC must be notified when the activities under the protocol are to begin and have completed. Principal Investigators must complete and submit an Annual Update Form by **November 1st** of each year through the duration of their project.

8. Following the completion of any protocol, the Principal Investigator must submit a Research Completed Form to the IACUC within 60 days of the protocol's completion.

9. All protocols, research areas, research personnel, and study animals are all subject to inspections by the IACUC Compliance Officer at any time, including field studies. The Principal Investigator will be notified if the Compliance Officer or a delegated IACUC member will be attending a scheduled activity and what information, or materials need to be prepared for discussion or review.

DE NOVO (THIRD YEAR) REVIEW

10. All on-going protocols must be re-submitted to the IACUC after three years for a new review and granting of approval. All submitted application documents must be reviewed, updated, and re-submitted. The Principal Investigator must also complete a new literature search, if applicable.

11. De Novo protocols must be submitted to the IACUC with sufficient time to obtain continuing approval of the protocol before its expiration date. The IACUC will try to send out reminders to the Principal Investigator and research team, but it is ultimately their responsibility to stay compliant with continuing reviews. De novo applications can be submitted up to three review cycles (~6 months) in advance of the protocol's expiration date.

12. Failure of the Principal Investigator to submit a de novo protocol and receive a continuing approval from the IACUC will result in the expiration of their protocol, in which all animal use activities must stop immediately.

PROTOCOL CORRECTIVE ACTIONS

13. A tiered approach will be taken to address any non-compliant issues identified or reported to the IACUC through the duration of a protocol.

14. A **formal warning** will be provided by the IACUC Chair to the individual who committed the infraction and any applicable supervisors. Individuals will have one week to become compliant with all IACUC requirements and local, state, and federal regulations.

15. Failure to respond to the formal warning will result in a **first offense** general sanction. Sanctions will be issued by the IACUC Chair to the individual who committed the infraction and any applicable supervisors. Individuals and their supervisors will be required to discuss the non-compliant item(s) with the IACUC Chair and the IACUC Compliance Officer within 30 days of the notice letter being issued.

16. Failure to appear at a sanction meeting and/or **subsequent offenses** of the same individual, and for the same regulation, will result in a reformative sanction. The IACUC will review all pertinent information and determine the appropriate remedial measures for the situation. Remedial measures can include required additional training, meeting with the Institutional Officer, termination of researcher animal use privileges, and/or recommendations to the organization for disciplinary action.

17. For sanctions on activities in which there is an immediate threat to the health or safety of an animal, the IACUC Chair may impose a reformative sanction pending rapid review by the IACUC. Individuals who receive a reformative sanction have the right to appeal to the IACUC.

RESEARCH PUBLICATION POLICY

18. Any activities which include publications, presentations, conferences, educational materials, or similar works must be reviewed and approved by Georgia Aquarium's Research and Conservation Department. The Research and Conservation Department can be reached at gairesearch@georgiaaquarium.org.

19. Any use of photography or videography obtained while conducting research at Georgia Aquarium must be reviewed and approved by Georgia Aquarium's Marketing Department prior to use. The Marketing Department can be reached at digitalmedia@georgiaaquarium.org and media@georgiaaquarium.org.

WHISTLEBLOWER POLICY

20. This Whistleblower Policy is intended to encourage and enable staff, volunteers, research colleagues, the general public, or members of the IACUC to raise serious concerns internally so that Georgia Aquarium's IACUC can address and correct deviations or suspected deviations from approved research protocols and Animal Welfare Regulations.

21. It is the responsibility of all staff, volunteers, research colleagues, and IACUC members to report concerns about deviations or suspected deviations from approved research protocols and Animal Welfare Regulations.

22. It is contrary to the values of Georgia Aquarium for anyone to retaliate against any staff, volunteers, research colleagues, the general public, or members of the IACUC who in good faith reports a deviation or suspected deviation of any regulation or policy governing Georgia Aquarium's Animal Care and Use Program. An employee who retaliates against someone who has reported a deviation in good faith may be subjected to the penalties outlined in Georgia Aquarium's Employee Handbook as a violation of Georgia Aquarium's Code of Conduct.

23. Georgia Aquarium's IACUC has an open door policy and suggests that staff, volunteers, and research colleagues share their questions, concerns, suggestions, or complaints with the IACUC Compliance Officer. The IACUC Compliance Officer is available for in-person discussion, telephone, or electronic communications. If you are not comfortable speaking directly to the IACUC Compliance Officer, reports can be made anonymously through IACUC's online reporting system.

24. The IACUC only oversees and investigates concerns related to deviations from approved protocols, deviations from federal regulations governing research facilities, and miscellaneous activities related to research. Any concerns regarding animal welfare should be submitted directly to the Animal Welfare Committee Chair (Eric Gaglione, Vice President of Zoological Operations, egaglione@georgiaaquarium.org), or anonymously to the Animal Welfare Committee (complete form and put in box near HR).

25. The IACUC Compliance Officer, in collaboration with the IACUC and Animal Welfare Committee, is responsible for ensuring that all complaints about deviations from approved research protocols, animal welfare, and/or miscellaneous activities are investigated and resolved. The IACUC Compliance Officer will advise the IACUC and/or the Animal Welfare Committee of any complaints and their resolution will be reported at the next IACUC or Animal Welfare Committee meeting following said resolution.

26. Anyone filing a written complaint concerning a deviation or suspected deviation must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a deviation. Any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false may be subjected to penalties outlined in Georgia Aquarium's Employee Handbook as a violation of Georgia Aquarium's Code of Conduct.

27. Deviations or suspected deviations may be submitted on a confidential basis by the complainant. Reports of deviations or suspected deviations will be kept confidential to the best extent possible, consistent with the need to conduct an adequate investigation. Personal information of all whistleblowers will be redacted before being presented to the IACUC.

28. The IACUC Compliance Officer will notify the person who submitted a complaint (unless submitted anonymously) and acknowledge receipt of the reported deviation or suspected deviation. All reports will be promptly investigated, and appropriate corrective action will be taken if warranted by the investigation.