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Distribution	<i>RAR/ACUC</i>	

VC – 4: Rodent Clinical Call Submissions

Purpose: This SOP describes the procedure for placing and responding to rodent clinical calls.

Note: All personnel are responsible for following the correct traffic pattern in rodent facilities (i.e., clean to dirty) to prevent inadvertently spreading infection to clean colonies. **Should an emergency necessitate room entry against the traffic pattern, veterinary personnel will replace PPE prior to entry into the cleaner facility.**

Personnel Responsibilities:

RAR Husbandry Technicians- Review animal health and detect abnormalities as our first line of defense.

RAR Supervisors or Designated Team Lead – If needed, collect information on clinical calls to help technicians.

Rodent Veterinary Technicians - Under the direction of the Director of Rodent Resources and the clinical veterinarian, review cases, implement treatment regimens, document clinical care, follow up with labs to assure that appropriate action is taken for sick animals, aids in training husbandry technical staff and if appropriate, the research staff, records the disposition of all clinical calls in the Rodent Clinical Call Log.

Clinical Veterinarians – Review clinical calls and coordinates treatments with veterinary technician on a regular basis, responds to emergency calls, as needed, coordinate and instruct technical assistance and documents case actions, as appropriate.

RAR Business Office Staff – Page veterinary technicians and veterinarians for emergency clinical calls.

Director/Manager, Lab Animal Management – Ensures husbandry staff is adhering to this SOP

Director, Rodent Resources - coordinates training sessions on clinical disease recognition for husbandry staff with the RAR veterinary team and the ACUC Office, reviews all deviations in this process and implement corrective action or SOP revision accordingly.

Materials and Information Required:

Orange colored "ANIMAL NEEDS ASSISTANCE" card
Clinical Call Log Sheet

HUSBANDRY STAFF:

A. Routine Clinical Calls

1. Technicians performs cursory look on each and every single cage every morning. Technicians identify cages with an orange clinical call card and enter information on the clinical call log posted on the room or suite door.

B. Emergency Clinical Calls at any time during business days

1. Technicians notify their supervisor or team lead, who calls the RAR central office (5-3273 or 5-3275). If the supervisor/team lead cannot be located, the technician makes the call and notifies the supervisor/team lead subsequently.
2. RAR central office text-pages the veterinarian on call.

C. Emergency Clinical Calls at any time on weekends and holidays

1. Technicians notify their supervisor/team lead who calls the veterinarian on call at 443-904-4332.). If the supervisor/team lead cannot be located, the technician makes the call and notifies the supervisor/team lead subsequently.

RAR OFFICE STAFF:

A. Emergency Clinical Calls:

1. Text-pages/calls the veterinarian or veterinary technician immediately.
 - o Veterinary Technician Pager: Mon-Th 8 am-3:30 pm, Fri-8 am-3:00 pm
 - o On-Call Veterinarian cell number: Weekdays after 4:30 pm (3pm Fridays) and on weekends and holidays.

VETERINARY TECHNICAL STAFF

A. All Clinical Calls:

1. Responds to routine and emergency clinical calls, and treats, or makes recommendation for treatment or euthanasia as directed by veterinary staff
2. Informs investigators/lab staff of veterinary treatment plan
3. Records treatment/ plan on orange clinical cards, clinical call sheets and online clinical call log
4. Monitors progress of treatment and ensures that all cases are closed out

CLINICAL VETERINARIAN

1. Provides direction to veterinary technical staff
2. Responds to emergency clinical calls and all calls when veterinary technical staff are absent
3. Ensures treatment and record keeping are complete.

HUSBANDRY TECHNICIAN PROCEDURES:

1. Perform cursory look on all cages. The technician should perform animal health checks **daily ideally prior to 10 am**, as much as possible, as follows:
 - Check each cage for **sick animals**.
 - Check cages for **orange clinical cards** that have NOT received attention within 24 hours (unless following weekends and holidays, in which case check they are entered on the clinical call log).
 - *Note: for ongoing cases that have received attention, the vet staff will have filled out and folded down the orange card, and dated and initialed the clinical call log sheet. For resolved cases, vet staff will have removed the orange card and noted "Case Closed" with date and initials on the clinical log sheet.*
2. Conduct a more thorough visual examination of the animals in the cage when handling during cage change out.
3. Fill out an orange clinical call card and place it on each cage needing attention with the following information:
 - Date
 - Investigator (Name)
 - Contact person
 - Telephone
 - Species
 - Protocol #
 - Location (building, room, rack, cage position in the rack)
 - Clinical problem
 - Recommendations

4. Place the filled out clinical call card on the cage needing attention.
5. Once you have finished checking the room, log new cases in the Clinical Call Log Sheet placed in the door of the suite/vivarium. Have the following information for each cage with a clinical call:
 - Date
 - Investigator (Name)
 - Location (room, rack, position)
 - Problem
6. For emergencies, follow steps 4 and 5 above, and fill out the Clinical Call Log Sheet as soon as possible. **During business hours**, place the clinical call immediately by calling 5-3273 or 5-3275. Provide the investigator name, animal location (building, room, rack, and cage position the rack), and the clinical problem. Seek assistance from the RAR Supervisor, if needed. RAR Office Staff will page Veterinary Technicians and Clinical Veterinarians. **Outside of business hours**, call 443-904-4332. See Appendix A for the list of emergency cases.

SUPERVISOR PROCEDURES:

1. **Assist Husbandry Technicians, as needed, including but not limited to doing health checks and reporting emergency clinical calls.**
2. For cases not requiring a veterinary clinical call, such as overcrowding, they call the lab to arrange for the appropriate actions.

OFFICE STAFF PROCEDURES:

1. Page Veterinary Technicians and Clinical Veterinarians for emergency calls, providing PI name, location of the animal (building, room, rack, and cage position in the rack).

VETERINARY TECHNICIAN/VETERINARIAN PROCEDURES:

1. Evaluate new cases and follow up on previously reported ones.
2. Non-emergency clinical calls for rodents should be accumulated by 10 am and calls are placed before noon am each day. The veterinary technician or clinical veterinarian on call will then respond to the calls in the most appropriate order on the same or the next day.
3. Manage emergency cases as soon as possible.
4. When rodent cases are reviewed, the clinical veterinary staff should place a succinct summary of findings, treatment information and final disposition on the back of the **Orange Clinical Card** and record that the animal has been checked on the **Clinical Call Sheet** Supervisors should use this information to update and educate their staff during weekly meetings.
5. Veterinarian or technician must provide distinct directives regarding each case on the Orange Clinical Card. Examples include who is responsible for treatments, cage separation, or surgery. The date that the task is to be completed must also be noted.
6. If the veterinarian or technician require that the animal(s) be euthanatized, the laboratory must be given a deadline.
7. When the case is resolved, the veterinarian or technician will remove the Orange Clinical Card from the cage and date and initial the "Case Closed" column on the Clinical Call Log Sheet.
8. Update Veterinary Management database daily during weekdays.

Dead Animals:





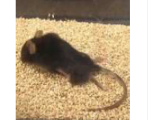
Rodents

The animals are bagged and tagged and placed promptly in the cooler. Freezing tissues causes irreparable tissue damage and should not be used if refrigeration is available. The carcasses are held for three days for recovery. If several animals die from the same protocol in a given time, inform the RAR supervisor who then informs the veterinary team.


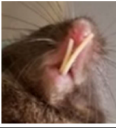
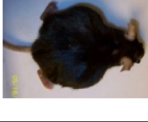



APPENDIX A

Quick Reference Guide for Rodent Emergency Clinical Calls

ALWAYS AN EMERGENCY

Condition	Image	Description
Dystocia		<ul style="list-style-type: none"> Female that is pregnant (distended abdomen), blood around vulva, hunched and lethargic +/- pup sticking out
Abandoned or small pups		<ul style="list-style-type: none"> Pups with no dam or mom; usually <14 days age (eyes will not be open and teeth are not developed)
Moribund		<ul style="list-style-type: none"> About to die Laying down, not moving very much, very lethargic Increased respiratory rate
Penile prolapse		<ul style="list-style-type: none"> Penile tissue protruding from sheath.
Paresis or paralysis		<ul style="list-style-type: none"> Full body paralysis is an emergency! Unable to get to food and water.

CAN be an Emergency

Condition	Image	When is it an emergency?
Fight wounds		<ul style="list-style-type: none"> Severe fight wounds, large amount of skin missing, bleeding, or genital trauma.
Malocclusion		<ul style="list-style-type: none"> If teeth are so overgrown animal cannot eat and/or the animal appears hunched and lethargic. **Provide diet gel ASAP**
Distended abdomen		<ul style="list-style-type: none"> If the animal is in obvious distress (hunched, lethargic)
Paresis or paralysis		<ul style="list-style-type: none"> Hind limb paralysis is not considered an emergency unless it progresses to full body paralysis because animals are unable to get to food and water. Animals should be provided with hydrogel and food on the cage floor.
Head tilt, circling		<ul style="list-style-type: none"> Emergency if animal is continuously spinning and unable to right itself.
Vaginal or uterine prolapse		<ul style="list-style-type: none"> Vaginal or uterine tissue protruding from vulva +/- ulcerated, hemorrhage, necrosis Evaluate the animal as a whole if the animal appears hunched and in distress it is an emergency.

Note: Any clinical case can be an **emergency!** Evaluate the animal as a whole. Ask yourself:

- Is this animal hunched?
- Does the animal appear dehydrated?
- Is the animal actively bleeding?
- Will this animal survive until the next day?
- Does this animal appear to be in pain?

When in doubt ask a supervisor! If a supervisor is not available call the case in for veterinary assessment!

I acknowledge that I have read and understand the JHU Animal Care and Use Program document “**SOP on Rodent Clinical Call Submissions**” and I will follow this procedure. I agree to bring any deviations in this procedure to the attention of my supervisor/GPS Working Group.

Name (Print)

Date

Signature