## Visitors to Animal Research Facilities

### <u>Scope</u>

The National Institutes of Health (NIH) has established programs and SOPs for all personnel and animal care staff that work in animal facilities. The following SOP is intended to provide occupational, health, and safety requirements for visitors and non-animal care staff entering animal facilities at the NIH. Any person who is named on an NIH Animal Care and Use Committee (ACUC) approved Animal Study Proposal (ASP) is not a visitor and does not fall within the scope of this policy. Veterinary students and residents training under an approved ASP do not fall within the scope of this policy.

### Visitors and Non-Animal Care Staff at Risk

This SOP shall apply to persons/visitors who enter the animal facility. All visitors should contact the ICs Animal Program Director (APD) or Animal Facility Managers (FM) prior to visit to ensure all necessary steps to gain access are completed and approved.

- Visitors are persons not on an ASP or involved in daily animal care. Visitors include but are not restricted to NIH federal employees, ACUC members, and contractors without independent access to animal areas, maintenance and construction workers, and members of the general public.
  - Visiting minors must adhere to NIH Policy 3015 <u>Admittance of Minors to Hazardous Areas</u>.
- Visitors may be accompanied and supervised by an NIH employee trained in the safe entry into animal rooms. See Table 1 Recommendations by Personnel Status and check IC policy for additional entry requirements.
- Visitors who enter an occupied animal room must wear appropriate personal protective equipment (PPE) and receive standard precautions and allergy counseling, prior to entering the animal facility. Refer to Attachment 1 for additional information on standard precautions and allergy counseling.
- DFOM personnel must be trained by their management prior to entry into animal rooms to conduct significant facility construction, renovation, or maintenance:
  - Risk assessments with the IC Safety Specialist and/or Animal Program Safety Manager may be conducted with DFOM and the animal facility to determine if animals must be removed from the immediate area.
  - $\circ$   $\;$  The area should be cleaned and disinfected as appropriate.
  - Visitors must be informed of any potential hazards and appropriate protective procedures, including required PPE.

### Visitors AEP Enrollment

Visitors that regularly enter animal facilities, ACUC members, and non-NIH animal facility inspectors must be enrolled in the NIH Animal Exposure Program (AEP), contractor equivalent, or home institution equivalent.

- NIH FTE, contractors who are enrolled in NIH Biosurety, or ACUC member must contact Occupational Medical Services (OMS) at 301-496-4411 to enroll in AEP.
- Visitors in an alternate category will provide the IC's animal program with the equivalent AEP documentation, such as a fit for duty letter signed by a medical professional.
  - Documentation should not include personal medical records.
- Vaccinations may be recommended prior to entry for areas with specific infectious agents.
  - See Table 2 for details based on animal species visited. OMS may specify recommended vaccines for entry.

Approved by JME 05/2024 Revised 05/2024 • Visitors to non-human primate (NHP) facilities will be required to comply with the facility health screening requirements set by the facility's Animal Program Director (e.g., provide proof of: TB testing, measles vaccination, measles titer or measles infection history.)

Table 1	Recommendations	ns by Personnel Statu	S
---------	-----------------	-----------------------	---

	Enrollment in	Access only with	Vaccine	NHP Facility	Animal
	NIH AEP,	an Escort who is	recommendations for	Health	Facilities
	contractor	trained and	entry into areas with	Screening	and/or
	equivalent or	cleared to enter	specific infectious	Requirements	Safety
	home institution	the specific	agents		Training
	equivalent	facility			
NIH Facility	Х		Х	Х	х
Maintenance					
staff (DFOM)					
NIH Integrated	Х		Х	Х	Х
Pest					
Management					
(IPM)					
Unescorted	Х		Х	Х	Х
contractor(s)					
Escorted		Х	Х	Х	
contractor(s)					
Visitor (foreign or		Х	Х	Х	
domestic) with					
no direct animal					
contact					
DFM/DFRS/Police	Х		Х	Х	х
staff					
Non-affiliated	Х	Х	Х	Х	
and non-					
scientific ACUC					
members					

### **Illness and Injury**

All visitors are required to report signs and symptoms of animal allergies or any other perceived health effects to OMS.

- For the Main Campus Clinic: call 301-496-4411, 7:30 am 5:00 pm ET, Monday Friday.
- For RML Campus Clinic: call 406-375-9600, 8:00 am 4:30 pm Monday Friday.
- For IRF-Frederick Clinic: call 301-631-7233, 8:00am -4:30 pm Monday Friday.
- For Baltimore Clinic: call 667-312-5843, 8:00 am -4:30 pm Monday Thursday and 7:00 am 3:30 pm Friday.
- For North Carolina Research Triangle: call 984-287-4178, 8:00 am 4:30pm Monday Friday.

If the local clinic is closed, call the Main Campus Clinic: 301-496-4411, 7:30 am – 5:00 pm ET, Monday – Friday; after-hours, or if there is no answer at the OMS clinic during business hours, call 301-496-1211 (NIH Operator), 5:00 pm – 7:30 am ET, Monday – Friday, and on weekends & holidays.

First aid after Bite, Scratch, Splash, Exposure (BSSE) to any Old World NHP:

1. Initiate immediate first aid (within the first 5 minutes of exposure):

- a. Contaminated skin and wounds should be flushed continuously for 15 minutes with clean running water or normal saline solution, a sponge, and a cleansing agent such as povidone-iodine or chlorhexidine, provided on-site in the NHP bite/scratch (BSSE) kit.
- b. Contaminated eyes and mucous membranes should be continuously irrigated at an eyewash station for 15 minutes using normal saline solution or clean running water.
- 2. After administration of first aid, immediately report the incident to the Bethesda OMS facility or have someone report on your behalf while administering first aid, if possible. Ask to speak with the OMS provider-on-duty, and state: "I have had a nonhuman primate-related injury or incident." For these types of incidents, notify Main Campus regardless of geographic location since the staff on main campus are the only medical providers permitted to authorize use of valacyclovir.
  - a. OMS will assess the injury or exposure by phone and provide further guidance.
  - b. If indicated, OMS will direct you to initiate immediate B virus post-exposure prophylaxis (PEP), found within the BSSE kit.

First aid after bite, scratch, splash, or exposure (BSSE) to other research animals including New World NHPs, rodents, fish, etc.:

- 1. Initiate immediate first aid (within the first 5 minutes of exposure):
  - a. Contaminated skin and wounds should be flushed continuously for 15 minutes with clean running water or normal saline, a sponge, and a cleansing agent such as povidone-iodine or chlorhexidine.
  - b. Contaminated eyes and mucous membranes should be continuously irrigated at an eyewash station for 15 minutes using normal saline or water.
- 2. After administration of first aid, report incident to OMS.

Emergency response for extensive or profusely bleeding injuries, immediately call 911 for assistance in addition to notifying the on-duty OMS provider.

Species	Mandatory	Recommended		
<u>Small Animals</u> Rodents, Rabbits, Guinea Pigs, Bats, Woodchucks, and Fish	<ul> <li>Standard precautions and allergy counseling.</li> <li>Discuss relevant zoonoses.</li> <li>Relevant vaccines are indicated by OMS for that respective area.</li> </ul>	<ul> <li>Tdap if not received as an adult and a Td booster every 10 years.</li> </ul>		
Large Animals Dogs, Cats, Sheep, Cattle, Pigs, Poultry	<ul> <li>Small Animals requirements plus:</li> <li>Rabies immunization, if warranted.</li> <li>Toxoplasma titer, if working with cats and warranted.</li> <li>Q Fever counseling, if warranted.</li> </ul>	<ul> <li>Tdap if not received as an adult and a Td booster every 10 years.</li> </ul>		
Nonhuman Primates (NHP) Working with live NHP or within the space	<ul> <li>Small Animals requirements plus:</li> <li>Negative TB testing (TST or IGRA) every 12 months.</li> <li>Positive rubeola (measles) titer; if negative, receipt of the MMR.</li> </ul>	<ul> <li>Tdap if not received as an adult and a Td booster every 10 years.</li> </ul>		

#### Table 2 NIH AEP Enrollment Recommendations

### Attachment 1 - Allergies to Laboratory Animals a Significant Health Risk

### What is an allergy?

An allergy is an exaggerated reaction by the body's immune system to proteins. In the case of allergies to laboratory animals, the proteins most frequently associated with the allergic reaction are found in the animal's urine, saliva, and dander. Wood chips used for animal bedding may also cause an allergic reaction.

#### What are the symptoms of allergic reactions to laboratory animals and when do they occur?

The earliest symptoms include nasal stuffiness, a runny nose, sneezing, red irritated eyes, and hives. Symptoms that suggest the development of asthma include coughing, wheezing, and shortness of breath. Asthma resulting from allergic reactions to laboratory animals can result in severe and occasionally disabling breathing problems. Rarely, personnel with allergic symptoms will develop a potentially life-threatening reaction following an animal bite.

Most personnel who develop allergic reactions to laboratory animals will do so within the first twelve months of working with them. Infrequently, reactions only occur after working with animals for several years. Initially the symptoms are present within minutes of the worker's exposure to the animals. Approximately half of allergic personnel will have their initial symptoms subside and then recur three or four hours following the exposure.

# Are there factors that are associated with an increased risk for developing an allergic reaction to laboratory animals?

Yes, a history of allergy to other animals (typically cats and dogs) is the best predictor for who will develop an allergy to animals found in research laboratories. Other factors associated with allergic reactions to laboratory animals include the individual's intensity, frequency, and route of the exposure to the animals. Personnel who have a personal or family history for asthma, seasonal allergies, and dermatitis are also at increased risk, individuals with no prior history of allergies and only brief work exposures can also develop allergic reactions to laboratory to laboratory animals.

# What can be done to reduce the chance that a worker will develop an allergic reaction to laboratory animals?

The best approach for reducing the likelihood that a worker will develop an allergic reaction is to eliminate or minimize their exposure to the proteins found in animal urine, saliva, and dander. This is accomplished by limiting the chances that personnel will inhale or have skin contact with animal proteins. In addition to using well-designed air handling and waste management systems in research areas, workers can reduce their risk of exposure by routinely using dust/mist masks, gloves, and gowns. If additional respiratory protection is required, the worker should contact the Technical Assistance Section, Division of Occupational Health and Safety (301-496-3353).

# What should you do if you are concerned that you may have some of the symptoms that suggest an allergic to laboratory animals?

Notify OMS to schedule an appointment for evaluation. All visitors are required to report signs and symptoms of animal allergies or any other perceived health effects to OMS.

### **OMS Health Units:**

Building 10, Room 6C306 7:30am–5:00pm M–F 301-496-4411 IRF Fort Detrick, Room 1B116 8:00am–4:30pm M–F 301-631-7233 Baltimore Bayview, Room 01B210 8:00am–4:30pm M–F 667-312-5843 Rocky Mountain Laboratories, Room 5202 7:30am–5:00pmMST M–F 406-375-9600 NIEHS, Building 101 Room E111 8:00am - 4:30pm M-F 984-287-4178 Approved by JME 05/2024 Revised 05/2024