



DEPARTMENT OF HEALTH & HUMAN SERVICES PUBLIC HEALTH SERVICE
NATIONAL INSTITUTES OF HEALTH

FOR US POSTAL SERVICE DELIVERY:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive
RKL1, Suite 360, MSC 7982
Bethesda, Maryland 20892-7982

FOR EXPRESS MAIL:

Office of Laboratory Animal Welfare
Division of Assurances
6705 Rockledge Drive, Suite 360
Bethesda, Maryland 20817
Telephone: (301) 496-7163
Fax: (301) 480-3418

May 22, 2014

Re: Renewal Assurance #A3345-01

David Weiss, Ph.D.
Vice President for Research and Institutional Official
University of Texas Health Science Center at San Antonio
7703 Floyd Curl Drive
San Antonio, TX 78229-3900

Dear Dr. Weiss:

The Office of Laboratory Animal Welfare (OLAW) has reviewed and approved the Animal Welfare Assurance (Assurance) which was submitted in compliance with the Public Health Service (PHS) Policy on Humane Care and Use of Laboratory Animals (Policy) revised August 2002.

Your renewed Assurance with identification #A3345-01 became effective on May 22, 2014 and supersedes any previously issued Assurance. The approval period is for four years, and will expire on May 31, 2018. Please be sure to reference your Assurance number in all correspondence to this Office.

The Assurance is a key document in defining the relationship of your Institution to the PHS since it sets forth the responsibilities and procedures of your Institution regarding the care and use of laboratory animals. Among the important elements of the Assurance, I would especially call your attention to the reporting requirements which are essential for continued compliance with the PHS Policy.

An Annual Report to OLAW is required at least once every 12 months. The reporting period is the calendar year. Reports, for the previous calendar year, are due **January 31**. Your Annual Report for 2014 must be received by this office by January 31, 2015.

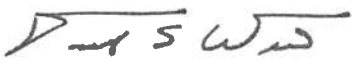
A copy of the approved Assurance signature page is enclosed. If I may be of any further assistance, please contact me.

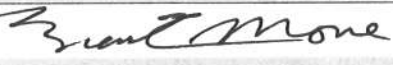
Sincerely,

Brent C. Morse, DVM, DAACLAM
Animal Welfare Program Specialist
Office of Laboratory Animal Welfare

cc: Rita Ghosh, Ph.D., IACUC Chair

VII. Institutional Endorsement and PHS Approval

A. Authorized Institutional Official	
Name: David Weiss, Ph.D.	
Title: Vice President for Research and Institutional Official	
Name of Institution: University of Texas Health Science Center at San Antonio	
Address: <i>(street, city, state, country, postal code)</i> 7703 Floyd Curl Drive San Antonio, Texas 78/229-3900	
Phone: 210-567-3720	Fax: 210-567-3719
E-mail: weissd@uthscsa.edu	
Acting officially in an authorized capacity on behalf of this Institution and with an understanding of the Institution's responsibilities under this Assurance, I assure the humane care and use of animals as specified above.	
Signature: 	Digitally signed by Weiss, David S DN: cn=Weiss, David S, o, ou=UTHSCSA, email=weissd@uthscsa.edu, c=US Date: 2014.05.07 18:59:14 -06'00'

B. PHS Approving Official <i>(to be completed by OLAW)</i>	
Name/Title: Brent C. Morse, DVM Office of Laboratory Animal Welfare (OLAW) National Institutes of Health 6705 Rockledge Drive RKL1, Suite 360, MSC 7982 Bethesda, MD USA 20892-7982 (FedEx Zip Code 20817) Phone: +1 (301) 496-7163 Fax: +1 (301) 480-3418	
Signature: 	Date: 5/22/14
Assurance Number: A3345-01	
Effective Date: 5/22/2014	Expiration Date: 5/31/2018