

United States Department of Agriculture Animal and Plant Health Inspection Service

EGONZALEZ **2016090000434248** Insp. id

Inspection Report

ADVENTHEALTH NICHOLSON CENTER 2415 N ORANGE AVE ORLANDO, Florida 32803 Customer ID: 40853

Certificate: 58-R-0153

Site: 002

FLORIDA HOSPITAL -NICHOLSON CENTER

Type: FOCUSED INSPECTION

Date: 11-SEP-2020

2.31(c)(3)

Institutional Animal Care and Use Committee (IACUC).

The May 2020 semiannual report for site 002 indicated there was a significant deficiency in general facility conditions. A ceiling tile in the front entry area had a water stain and needed to be replaced. The report noted the deficiency but did not contain a specific plan and schedule with dates for correcting the deficiency. Additionally, the letter to the Institutional Official did not mention any significant deficiencies. These aspects of the semiannual report ensure that the committee informs the Institutional Official of any program deficiencies, identifies facility needs, and, if present, animal welfare issues, as well as establishing a plan for correction of deficiencies. Animal welfare may negatively be impacted if a plan for correction of deficiencies is not developed and followed. All semiannual reports must be reviewed and signed by a majority of the IACUC members, include any minority views, and be submitted to the Institutional Official at least every six months. These reports must identify and describe departures from the regulations or standards, distinguish significant from minor deficiencies, and provide a reasonable and specific plan and schedule with dates correcting each deficiency.

TO BE CORRECTED ON THE NEXT SEMIANNUAL REPORT.

Prepared By: ELBA GONZALEZ Date:

Title: VETERINARY MEDICAL

OFFICER

Received by Title: IACUC Representative Date:

15-SEP-2020

15-SEP-2020

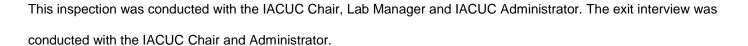
USDA, APHIS, Animal Care



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Inspection Date: 11-Sep-2020

Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
40853	58-R-0153	002	FLORIDA HOSPITAL - NICHOLSON CENTER	11-SEP-2020

Count	Scientific Name	Common Name
000000 000000	NONE Total	NONE