Necropsy & Your Safety



Kathy Burek and Natalie Rouse Alaska Veterinary Pathology Services January 29, 2021

What to bring and expectations

- Water
- Snacks
- Extra change of clothes
- Long hours
- An awesome time!



Field Necropsy

- Be prepared
- Weather (cold rain vs hot sun)
- Terrain (mud, rocks, etc)
- Tides
- Bears
- On-lookers



Safety

- What are the hazards?
- Biohazards
 - All contaminated scalpel blades, needles and sharps are disposed into sharps container
 - Wear proper PPE
- Physical injury
 - Blood and guts are slippery
 - Be aware of the surroundings and take care of yourself
 - Ergonomics issues



annap@alaskasealife.org

Personal Protective Equipment

- In the field boots, waterproof rain pants and jackets, and gloves are worn
- In Lab: shoe covers, aprons, gloves, masks





Zoonosis

- A zoonotic disease is one that can be transmitted from animal to humans
- open wounds, eyes and mouth
- Pathogens can be transported home to your pets when your clothing or hair becomes contaminated.



"Seal finger" or mycoplasma infection, can lead to septic infection if not properly treated.

Following proper safety procedures and proper use of PPE, lowers the chance of zoonotic disease transmission to you and your pets

Necropsy Time

"Clean" gloves vs "dirty" gloves

Always keep track of what you have touched and the status of your gloves. If you are a "clean" person and you contaminate your gloves... get new gloves before proceeding



Assigned roles

1. Sample collector- "DIRTY PERSON"

- Dissect / handle tissues
- DON'T TOUCH "clean" surfaces outside of bags, vials or sterile tools, paperwork, CAMERA!.

2. Runner- INTERMEDIATE

- mostly "clean", however likely to get dirty
- Bagging
- Maybe photos
- Labeling, getting extra supplies, etc.
- 3. Data collector- "CLEAN PERSON"
 - Paperwork necropsy form and check list
 - labeling and handling bags
 - Camera handler

Sample Collection: tools of the trade

- Labeling Date, Animal #, tissue type
- Whirl packs in various sizes
- Zip lock bags in various sizes
- Cryovials
- Teflon plastic and foil
- Formalin (carcinogenic, don't inhale or make direct contact with skin)
- Various tubes

Proper bag handling



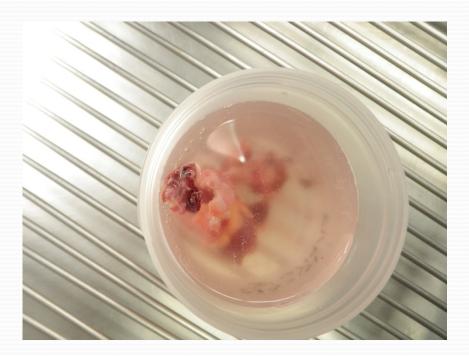
 Fold over edges of ziplock bag when placing tissue inside

Formalin

Cautions

- Irritant at low levels
 (burning of eyes, nose, skin)
- Acutely toxic when ingested (nausea, convulsions, respiratory failure, coma, death)
- Carcinogenic (nose, throat, and blood cancers)
- Be careful with formalin and keep the bucket covered to limit vapors

- The volume of formalin should be 10 times the volume of tissue
- Tissue not thicker than 1 cm



Sample in teflon



Whirl pak

- Hold open whirl pak by white tabs
- DO NOT TOUCH THE INSIDE!!!
- Squeeze out air, fold multiple times over white tabs
- Fold over yellow tabs





Samples into cryovial

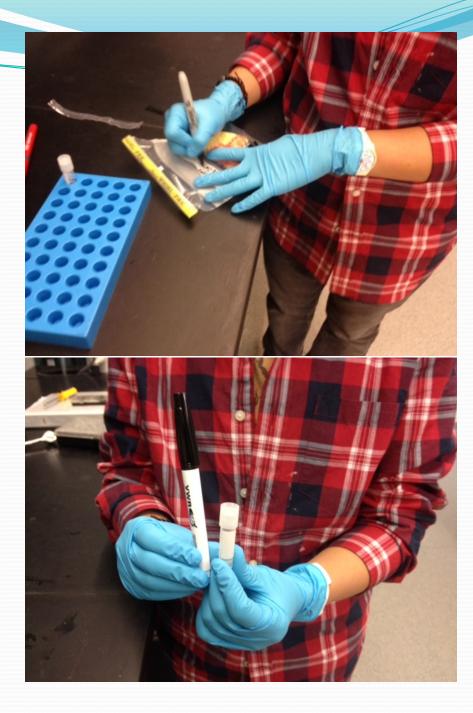
- Samples such as viral and bacterial swabs and tissues go into a cryovial with transport media
 - They are sterile. Open only when ready and place the cap UP
 - Lower the swab into the cryovial
 - Lift up slightly and snap the swab carefully before capping the cryovial



Label Everything!

- Use durable markers to make legible detailed labels
- Sharpies for bags

Lab markers for cryovials



CLEAN RINSE DISINFECT RINSE

AVPS/UAA Volunteer Paperwork

*Note ASLC has their own system You MUST be signed up under one of us, can be a volunteer for both

- New Volunteer Checklist
- Smartwaiver liability waiver

https://waiver.smartwaiver.com/w/5e505293d6093/web/

Match Form

New Volunteer Checklist – only fill out the highlighted portions on Page 1



UNIVERSITY OF ALASKA VOLUNTEER QUALIFICATION CHECKLIST

The Volunteer Checklist is to be used with the "Guidelines for Departments Using Volunteer Services" Use of volunteers is affected by complex compliance issues including but not limited to Human Resources, INS, Risk, IRS, and Fair Labor Standards Act. Guidelines and checklists have been developed to help you avoid consequences to both your volunteer and your department, but "case by case" issues may require further consultation. Departments using volunteers are responsible for reading, understanding and implementing the guidelines. Departmental signature and approval of this checklist means the signers have correctly navigated the various issues and implemented the guidelines document, which is found at: http://www.alaska.edu/risksafety/download/Guidelines-for-Departments-Using-Volunteer-Services.pdf

| Department Information | | Date: | | | | | | |
|--|------------------------------|--|---|--|--|--|--|--|
| Your campus: | Anchorage | Your department: | College of Arts and Sciences | | | | | |
| Department contact (your name): | Kathy Burek Huntington | Your title: | adjunct professor | | | | | |
| Your phone: | 907 242-2566 | Your email: | avps.kbh@gmail.com | | | | | |
| | | | | | | | | |
| Volunteer Information | | Name of volunteer: | | | | | | |
| Address of volunteer: (Street, City, State) | | | | | | | | |
| Name of UA employee(s) who will d Kathy Burek Huntington | irectly supervise volunteer: | Job Title(s) of UA employ Adjunct professor | Job Title(s) of UA employee(s) Adjunct professor | | | | | |
| Location(s) of volunteer service Alaska / primarily Anchorage area | | Dates and times of volunteer service: Will vary depending on strandings | | | | | | |
| Specific tasks and duties to be assigned to volunteer: Assist with Necropsies | | | | | | | | |

| Is Volunteer a university employee? | No | Yes 📥 | Current Position: | Current Dept: |
|-------------------------------------|----|-------|-------------------|--|
| If yes, HR approval is required. | | | Initial that: | Volunteer services will not be the same type of services as those performed as an employee |
| | | | | Employee will not perform volunteer services during their normal working hours |

| - | | | | | | | | |
|----|--|--------------|--|--------------|---|--|--|--|
| VC | LUNTEER QUALIFICATIONS: | No | | Yes | | | | |
| 1 | Is the person in pay status for time worked from an employer during the indicated dates and times of volunteer of service? | \checkmark | If no, continue. | | If yes, stop here. Individual does not qualify | | | |
| 2 | Is the person authorizing the volunteer services and/or supervising the volunteer a family member or co-habitant of the volunteer? | I | If no, continue. | | If yes, stop here. Individual does not qualify | | | |
| 3 | Is the person receiving course credit for their work? | 1 | If no, continue. | | If yes, stop here. Individual does not qualify | | | |
| 4 | Will the volunteer work under the direct supervision of, and be given the means and direction for the performance of work, by a paid UA employee? | | If no, stop here. Individual does not qualify | \checkmark | | | | |
| 5 | Will the volunteer perform work where there is a legitimate need for services? | | If no, stop here. Individual does not qualify | 1 | If yes, continue | | | |
| 6 | Is the work related to the business or operations of UA? | | If no, stop here. Individual does not qualify | 1 | | | | |
| 7 | Does the volunteer have the skills necessary to perform the work? | | If no, stop here. Individual does not qualify | \checkmark | | | | |
| 8 | a. Is Volunteer a US citizen or eligible for unrestricted employment in the US? | | If a. & b. are no, stop here. | 1 | If EITHER a. or b. are | | | |
| | b. Is the volunteer performing a service that no one is paid to do? | | Individual does not qualify. | V | Yes, continue. | | | |
| | IF YOUR POTENTIAL VOLUNTEER MEETS THE MINIMUM QUALIFICATIONS ABOVE, PLEASE CONTINUE THIS CHECKLIST TO DETERMINE IF ADDITIONAL REVIEW AND/OR APPROVAL ARE NEEDED FROM YOUR CAMPUS RISK MANAGEMENT: | | | | | | | |

• New Volunteer Checklist – Don't fill out anything on Page 2.

CHECK "NO" OR "YES" BELOW. If there are "YES" responses, you must forward this checklist to Campus Risk Management for review and approval prior to committing the individual to volunteer service.

| 1. | Is Volunteer under the age of 18? | No | Yes 📥 | Written permission must be received from Campus Risk Management and from a parent or legal guardian. | | | | | |
|---------|--|-------------------------|-------|--|-------------------------------------|--|--|--|--|
| | | 1 | | Contact Campus Risk Management to obtain this form. | | | | | |
| 2. | Will Volunteers drive a vehicle for university business? If yes, contact Campus Risk Managementents. Volunteers may not transport groups, students, minors, or | | | | | | | | |
| | non-UA affiliated persons on UA business or UA sponsored events and activities. Exceptions may be granted by Risk Management. Attach request and explanation | | | | | | | | |
| 3. | Is volunteer service taking place | No | Yes 📥 | Contact Campus Risk Management with details to include current residence of potential volunteer. | | | | | |
| | outside the state of Alaska? | \checkmark | | | | | | | |
| 4. | Will Volunteer receive any | No | Yes 📥 | Contact Campus Risk Management. Compensation requires HR approval, signed volunteer agreement, | | | | | |
| | compensation? | \checkmark | | necessary withholding forms, and SSN. Written Volunteer Agreemen | ts may be used ONLY under direction | | | | |
| | - | V I | | and approval of Human Resources and Campus Risk Management | | | | | |
| | | | | Description: | Amount: | | | | |
| | | | | a montheast | | | | | |
| | | | | Expenses (itemize): | | | | | |
| | | | | Benefits (describe): | | | | | |
| | | | | Denemis (deserioe). | | | | | |
| | | | | Nominal Fee (describe): | | | | | |
| | | | | TOTAL | | | | | |
| | | | | What would UA otherwise pay to hire someone to provide the same ser | vices? | | | | |
| | | | | Position title: Hourl | | | | | |
| | | | | Attach a copy of any written agreement or contract with the Volunteer. | | | | | |
| 5. | Will Volunteer be in contact with | No | Yes 📫 | May be subject to a criminal background check. Contact Campus Risk | Management with details. | | | | |
| 3322.00 | minors (e.g. coaches, recreational | $\overline{\mathbf{V}}$ | | , , , | | | | | |
| | assistant, student services, etc.)? | | | | | | | | |
| - | | | + · | Dilli | | | | | |
| 6. | Will Volunteer be in contact with | No | Yes 📫 | Contact Campus Risk Management | | | | | |
| | animals | | L. | | | | | | |

Department Review & Approval

- > For helpful information on volunteering for UA, refer your qualified volunteers to the "INFORMATION FOR VOLUNTEERS" document.
- > I have read the "Guidelines For Departments Using Volunteer Services" and approve the volunteer services described above.
- RECORD RETENTION: We will keep a copy of this form in our department for one year AFTER volunteer service has been completed.

| Dean / Director Signature | Print Name | Date | | | | | |
|--|------------|------|--|--|--|--|--|
| Campus Risk Management and/or Human Resources Review & Approval, if required | | | | | | | |
| | | | | | | | |
| Campus Risk Management Director/Designee Signature | Print Name | Date | | | | | |
| Campus Human Resource Director / Designee Signature | Print Name | Date | | | | | |

University of Alaska Volunteer Qualification Checklist SORS 050213 Page 2 of 2

Match Form

Print, fill, scan or photo and return via email to: <u>avps.natalierouse@gmail.com</u>

You can also send me your info and rate and I will send you a form via Docusign

UNIVERSITY OF ALASKA ANCHORAGE

Third Party Cost Sharing Contributions

For Completion by Individuals or Organizations Participating in UAA Grant Programs. Thank you, for participating in the following grant program at the University of Alaska Anchorage. Federal and University policy requires that we request the following information in order to report monetary amounts for third party cost participation to our sponsors. Contributions, to be considered allowable for reporting purposes must be incurred during the grant period (listed below) and must be consistent with the grant sponsor guidelines. Questions regarding allowable costs should be addressed to the Grant Technician listed below. Completion examples for this form are included.

For Individuals: Contributions may include personal time at appropriate rates for the type of services rendered, communication and transportation costs and miscellaneous expenses incurred in direct relationship to the grant for which you were not reimbursed. Base rate is \$19.97 for inexperienced volunteers FY2021 (2020-2021).

For Organizations: Contributions include actual costs for staff time and fringe benefits, services, supplies or other allowable (indirect or administrative costs may be included if you have a federally approved rate) organization costs which were not reimbursed by the grant.

Grant Sponsor NOAA/NMFS

Grant Award Number: NA20NMF4390115

Continued Strengthening of AK's Marine Mammal Stranding Program through Statewide Stranding Coordinator for level A - C Response with Improved Data and Sample Management

Grant Technician: UAA Post Award

Grant Period: 10/01/2020 - 09/30/2021

Contributions:

| Individual: Personal time: (8) hours () days Other expenses: list type of expense | | lumber, | Value/unit \$ 19.97 | \$ | 159.76 |
|---|--------------|-------------|---------------------|----------------------|---------------|
| Total | | | | \$_ | 159.76 |
| Organizations: Staff time and benefits Services, supplies, travel, equipment Indirect or Facilities and Administrat Total | | | | \$ \$ \$ \$ | <u>159.76</u> |
| Individual name or Organization nan | ne (printed) | | | | |
| ** Signature: Date | | Printed nam | e | | |

** For organizations an administrative officer should sign. RETURN FORM TO: Natalie Rouse, avps.natalie.rouse@gmail.com

Or Grants and Contracts University of Alaska Anchorage PO Box 141628 Anchorage, AK 99514-1628

