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May 23, 2005

Buff Whitman-Bradley

RE: Request for Information Pursuant to the California Public Records Act

Dear Ms. Whitman-Bradley,

This is in response to your letter dated April 26, 2005 in which you inquire about the status of your request for information pertaining to a male rhesus macaque, #30916. I had not forgotten about your request, unfortunately it arrived during a time when quite a few other requests were received. I am following up with the California National Primate Research Center to make certain that they are still working on gathering the records and I will notify you as soon as they become available.

I apologize for the delay and appreciate your patience.

Sincerely,

A handwritten signature in blue ink that reads "Lynette Temple". The signature is cursive and fluid.

Lynette Temple
Information Practices Coordinator
(530) 752-3949



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June 22, 2005

Buff Whitman-Bradley

RE: California Public Records Act Request

Dear Ms. Whitman-Bradley,

This is in response to your letter dated April 26, 2005, in which you request all records pertaining to a male rhesus macaque #30916. Enclosed please find the following records:

- 1) All of the pages from the health jacket of 30916 (12 pages)
- 2) Animal Demographic/Medical Profile for animal 30916 (1 page)

We have redacted personally identifying information concerning individuals directly involved in research activities concerning primates due to verbal and physical harassment, including death threats, which have been made against these individuals. This information is withheld pursuant to section 6255 of the California Public Records Act, which permits the University to not disclose records when the public interest served by not making the records public clearly outweighs the public interest served by disclosure of the record. In this case the public interest in withholding personally identifying information about these individuals due to actual harassment and threats of harassment that have occurred and continue to occur clearly outweighs the public interest in the disclosure of this information. See, e.g., *Times Mirror Co. v. Superior Court*, 53, Cal.3d 1325 (1991) (public interest in withholding the appointment calendars of the Governor of California due to "potential threat to the Governor's physical security" outweighed public interest in disclosure of the calendars); *New York Times Co. v. Superior Court*, 218 Cal.App.3d 1579 (1990) (names of persons who have violated water allocation limits may be withheld when there is evidence that release of such information may subject those persons to harassment or assault).

For the same reasons, we have also redacted information that would identify the locations within the Primate Center where these primates are housed in order to ensure the safety and security

Buff Whitman-Bradley

June 22, 2005

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of the animals and individuals involved in research concerning the animals. Similarly, project codes (used for identification of the research project and associated researchers) have been redacted in order to preserve and maintain the academic freedom of the University's animal researchers. There is little or no legitimate public interest in obtaining information that would link individual researchers with specific research projects, and the invasion of privacy and security associated with such a disclosure weighs significantly against the public interest.

Since the information we are providing you is less than fifty pages, we are waiving our normal fee of \$.10/page for the reproduction of these pages.

Should you have any additional requests please let me know.

Sincerely,



Lynette Temple
Information Practices Coordinator
(530) 752-3949

Enclosures

30916

California Primate Research Center

1

Animal Number

Page



Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE

HYDRATION (G.F.P)*

STOOL (N,SS,L,B)**

Observation

Init

4-16-98

Born in

6-23-98 0.94

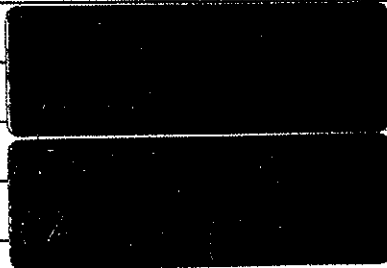
0.1cc ket IM, tattoo

10-13-98 1.63

0.2cc ket IM, tattoo

3-11-99 1.71 M/L - - -

.3cc ket IM, SB TO HOOTH/W



3/11/99

Good hydration, perianal soiling.

Azithro 40 2ml PO BID
DRUG DOSE AMT. ROUTE FREQ.
 3/11 3/11 1
START END DAY ADD COMMENTS:
 30916 - LOC: 1

No wt gain in 4 mos. P/O taken started on azithro x 5d. offer ORT, RC & FLT

Azithro 40 1 PO BID
DRUG DOSE AMT. ROUTE FREQ.
 3/12 3/15 1
START END DAY ADD COMMENTS:
 30916 - LOC:

3/12/99

G/F/L So: BAR

3/13/99

F G/SS/W So: BAR

3/14/99

F G/M/SS So: BAR. Eats RC, drank ~ 7W a CRT

3/15/99

(G/B/N) So: BAR; ate rice cereal.

205

A/C (3/11): scant Shigella & 2+ Campylobacter

SS (3/12): neg

P. began bacitral x 5d

* G = good, F = fair, P = poor.

** N = normal, SS = semi-solid, L = liquid, B = Bloody

730620.01

30916

California Primate Research Center

2

Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPELITE (G,F,P)

HYDRATION (G,F,P)

STOOL (N,SS,L,B)

Observation

Init

3/16/99

6/10 GN 80:BAR

Bactral 85 04 IM SID
DRUG DOSE AMT. ROUTE FREQ.
 3/16 3/20 6
START END DAY ADD.COMMENTS:
 30916
AN# LOC.

3/17/99

6/10 GN 80:BAR

3/18/99

6/10 FN 80:BAR

SS(3/12) supplemental report: IFA (2)

3/19/99

6/10 GN 80:BAR

3/20/99

6/12 GN 80:BAR

3/21/99

6/10 GN 80:BAR

A: resolution of diarrhea
P: D/C to home care

3/22/99

D/C FROM

6-8-99

2.72

0.3cc Bled IM

8-11-99

3.22

R/c MOVED FROM 1

MO# 8690

8/12/99

0.06ml Ivermectin SQ

8-18-99

moved

MO# 8702

8/24/99

3.11

.3cc Bled 1mc → Radiology
w/ 4045

Preproject PE: All within normal
limits. Radiographs: Mild interstitial pattern
consistent with mild lymphatic interstitial

* G = good, F = fair, P = poor

** N = normal, SS = semi-solid, L = liquid, B = Bloody

730620.01

CALIFORNIA REGIONAL PRIMATE RESEARCH CENTER

ANIMAL DEATH RECORD

Species: MMU

ID #: 30916

Date of Death: 09/16/99

Type of Death:

Date Reported: 09/16/99

- D Spontaneous Death
- X Experimental Design
- A Experimental Accident
- M Medical Cull Diagnostic
- K Medical Cull
- S Surgical Cull

Home Location: _____

Present Location: _____

Weight: 3.44

Sex: M

Probable Cause of Death (technician or clinician): pentobarbital overdose / 1 um

perforator Signed L

Pathological Diagnosis (clinician or pathologist): _____

Necropsy not performed Signed _____



CALIFORNIA PRIMATE
RESEARCH CENTER

mm 30916

I.D. PROJECT CODE

ANIMAL I.D.

RADIOLOGY

8124189

DATE OF EXAM

INVESTIGATOR REQUESTOR



ANIMAL DATA. HOMEROOM CAGE

SEX M AGE 1 YR 4 MO WEIGHT 3.2 KG

HOSPITAL ROOM CAGE

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

TENT. DIAGNOSIS:

HISTORY:

Preproject Thoracic radiographs

SPECIAL PROCEDURES:

Previous radiographs: Yes No

Investigator: _____

Repeat studies required

at _____ days/weeks/months

Technique: Vertical

Table Top

Bucky

Film Type: QUANTA

Total No. Films: _____

	cm	ma	time	kvp
Lat.		58	40s	74
VD		6	1	76

RADIOGRAPHIC INTERPRETATION:

Mild diffuse interstitial pattern

CONCLUSIONS:

Mild lung mte infestation

E48710
T28800
M00100

EXAM REQUESTED

Head

- nasal cavity
- teeth upper R L
- lower R L
- mandible R L
- maxilla R L
- skull - routine

Neck

- cervical spine
- soft tissues

Thorax

- routine
- thoracic vertebra
- esophagus
- thoracic inlet

Abdomen

- routine
- obstruction series
- liver
- intestinal tract
- kidney, ureter bladder
- uterus
- prostate
- lumbar vertebra
- sacral vertebra
- coccygeal vertebra
- I.U.
- cystography
- upper g.i.
- lower g.i.
- myelogram

Arm

- shoulder
- R humerus
- elbow joint
- L radius-ulna
- carpal joints
- hand

Leg

- pelvis
- R hip joint
- femur
- L knee joint
- tibia-fibula
- tarsal joints
- foot

Ultrasound

Other: (Specify)

REPORTED BY: _____

REPORT DATE: _____

CLINICAL RADIOLOGY

VIRAL PRECAUTION 4605

**CALIFORNIA PRIMATE
RESEARCH CENTER**

mmu 30916
ANIMAL I.D.

HEMATOLOGY

8/24/99
DATE OF SAMPLE

I.D. _____ PROJECT CODE _____

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: - HOME ROOM _____ CAGE _____

M
SEX _____ YR _____ MO _____ KG _____
AGE _____ WEIGHT _____

PROEDURE IS: _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL _____

<p>CLINICAL SIGNS / PROBLEMS: <i>Preproject</i></p>	<p>PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES</p>
<p>HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/></p> <p>ROOM _____ CAGE _____</p>	<p><input type="checkbox"/> 2-COLOR FACS CD4 = _____ /μl</p> <p><input type="checkbox"/> 3-COLOR FACS CD8 = _____ /μl</p> <p>CD4/CD8 RATIO = _____</p>

BLEEDING CONDITIONS: Squeezed - limb pulled Caught on run Fasted _____ hrs Anesthetized Other _____

COMPLETE BLOOD COUNT: ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN

<input type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC <u>14.2</u> X 10 ³ / μ l		<p>PLATELETS</p> <p><input checked="" type="checkbox"/> ADEQUATE</p> <p><input type="checkbox"/> DECREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3</p> <p><input type="checkbox"/> INCREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3</p> <p><input type="checkbox"/> LARGE PLATELETS</p> <p><input type="checkbox"/> CLUMPED</p>
			<input type="checkbox"/> CORRECTED WBC _____ X 10 ³ / μ l		
WBC	<u>14.2</u>	X 10 ³ / μ l	DIFFERENTIAL	<u>8/24/99</u>	
FBC	<u>5.56</u>	X 10 ⁶ / μ l	METAMYELOCYTES		
HEMOGLOBIN	<u>12.3</u>	gm/dl	BAND NEUTROPHILS		
HEMATOCRIT	<u>37.3</u>	%	SEG. NEUTROPHILS	<u>48</u>	<u>6816</u>
MCV	<u>67</u>	fl	LYMPHOCYTES	<u>47</u>	<u>6674</u>
MCH	<u>22.1</u>	pg	MONOCYTES	<u>5</u>	<u>710</u>
MCHC	<u>33.0</u>	pg/fl	EOSINOPHILS		
PLATELETS	<u>6.86</u>	X 10 ⁵ / μ l	BASOPHILS		
<input type="checkbox"/> RETICULOCYTES	%	_____ X 10 ⁵ / μ l	OTHER		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC		

<p><input type="checkbox"/> PLASMA PROTEIN <u>6.9</u> gm/dl</p> <p>PLASMA COLOR: <input checked="" type="checkbox"/> NO ABNORMALITIES <input type="checkbox"/> HEMOLYZED <input type="checkbox"/> ICTERIC <input type="checkbox"/> LIPEMIC</p> <p><input type="checkbox"/> FIBRINOGEN <u>2100</u> mg/dl</p>	<p>COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE <input type="checkbox"/> PREDILUTE</p>
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REPORTED BY: _____ REPORT DATE: 8/24/99

1485

CALIFORNIA PRIMATE RESEARCH CENTER MICROBIOLOGY

MMU 30916
ANIMAL I.D.

I.D. PROJECT CODE

INVESTIGATOR REQUESTOR

8/11/99
DATE OF SAMPLE

ANIMAL DATA: HOME ROOM CAGE

M SEX 1 YR 3 MO AGE 3.22 KG WEIGHT

PROCEDURE IS: _____ DIAGNOSTIC AID COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: <input type="checkbox"/> DIARRHEA	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/>	SOURCE OF SPECIMEN(S) RECTAL SWAB

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>		
<input type="checkbox"/> CAMPYLOBACTER			
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	AZITHROMYCIN (AZM15)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:

REPORTED BY: _____

8/13/99
REPORT DATE:

CLINICAL MICROBIOLOGY

White - Animal's Chart Yellow - Laboratory Pink - Requestor Goldenrod - Clinical Pathology

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CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

mmu 30916

I.D. _____ PROJECT CODE _____

ANIMAL I.D.

6/12/99

DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: — ROOM _____ CAGE _____

M

YR *10* MO _____

KG

PRODEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

SEX

AGE

WEIGHT

CLINICAL SIGNS/PROBLEMS:

DIARRHEA

Supplemental Report

PRIOR THERAPY NO YES
LIST ALL AGENTS:

HOSPITALIZED NO YES ROOM _____ CAGE _____

SOURCE OF SPECIMEN:

FECES, Fresh catch Composite
 FECES, Cage sample OTHER _____

PROCEDURE REQUESTED:

DIRECT EXAMINATION

CONCENTRATION

SEDIMENTATION
FORMALIN-ETHYLACETATE

FLOTATION
ZINC SULFATE

SKIN SCRAPING EXAM

STAIN FOR ACID FAST BACILLI

CRYPTOSPORIDIA / GIARDIA IFA

OTHER _____

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY:	COLOR:
EXAMINATION	<input type="checkbox"/> RBC: <input type="checkbox"/> WBC: <input type="checkbox"/> OTHER:	

Balantidium coli	Entamoeba histolytica
Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	Trichuris trichiura
Entamoeba hartmanni	No Parasites Seen

<input checked="" type="checkbox"/> Cryptosporidium IFA.	Acid fast bacilli
<input checked="" type="checkbox"/> Giardia IFA <i>3/17/99</i>	Budding yeast

REPORTED BY: _____

REPORT DATE: *3/17/99*

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinic Pathologist

158

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

MMU 30916
ANIMAL I.D.

I.D. PROJECT CODE

3/12/99
DATE OF SAMPLE

INVESTIGATOR REQUESTOR

ANIMAL DATA: ROOM CAGE M YR 10 MO SEX AGE WEIGHT
PROEDURE IS: X DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> ROOM CAGE	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER
--	---

PROCEDURE REQUESTED:

<input checked="" type="checkbox"/> DIRECT EXAMINATION	<input type="checkbox"/> SKIN SCRAPING EXAM
<input type="checkbox"/> CONCENTRATION	<input type="checkbox"/> STAIN FOR ACID FAST BACILLI
<input type="checkbox"/> SEDIMENTATION FORMALIN-ETHYLACETATE	<input checked="" type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA
<input type="checkbox"/> FLOTATION ZINC SULFATE	<input checked="" type="checkbox"/> OTHER

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <i>uniformed</i>	COLOR: <i>brown</i>
EXAMINATION	<input type="checkbox"/> RBC: <i>φ</i> <input type="checkbox"/> WBC: <i>φ</i> <input type="checkbox"/> OTHER:	

Balantidium coli	Entamoeba histolytica
Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	<i>few</i> Trichuris trichiura
Entamoeba hartmanni	No Parasites Seen
Cryptosporidium IFA	Acid fast bacilli
Giardia IFA	Budding yeast

REPORTED BY: _____ REPORT DATE: 3-12-99

CLINICAL PARASITOLOGY

ENTERED APR 16 1998

Infant ID MMU 30916

CALIFORNIA REGIONAL PRIMATE RESEARCH CENTER
PREGNANCY TERMINATION FORM

A. FILLED OUT BY TECHNICIAN:

Conception # _____ Date Terminated 4-16-98

Female ID # _____ or Identifying Info E

Birth Information:

Viability: L Live (Fill out section C) Location: _____
D Dead (Fill out section B) Weight: _____ grams

Sex: U Unknown Delivery Mode: V Vaginal
M Male N Surgical
F Female NX Surgical Experiment
X Hermaphrodite VX Vaginal Experimental

Pregnancy Type: RI Research Intervention
RC Research Control
RB Research Breeding
LB Long-term Breeding

Relocation: _____ Termination Comment: _____

Recorded by: _____ Date: 4-16-98

B. FILLED OUT BY PATHOLOGIST:

NT No Tissue FX Live, Term, euthanized at birth
FD Fetal Death ND Live, Died Day of Birth (Lungs inflated)
FN Found at necropsy FL Fetal Delivery Live in Utero

Necropsy performed: Y Yes
N No

Pathological Diagnosis: _____
(48 characters only)

Recorded by: _____ Date: _____

C. FILLED OUT BY RESEARCH SERVICES

Infant ID: MMU 30916 (If birth condition is Live)

Assignments: Generation: Ø3 Colony: L
Payor: 1
Projects: _____
Census Flags: _____
Social Code: SH

Recorded by: _____ Date: 4/16/98

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CALIFORNIA PRIMATE RESEARCH CENTER MICROBIOLOGY

mmu 30916

ANIMAL I.D.

3/11/99

DATE OF SAMPLE

I.D. PROJECT CODE

INVESTIGATOR REQUESTOR

ANIMAL DATA: HOME ROOM CAGE

M SEX

YR 10 MO AGE

KG WEIGHT

PROCEDURE IS: X DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: X DIARRHEA

PRIOR THERAPY LIST ALL AGENTS:

HOSPITALIZED NO YES X

SOURCE OF SPECIMEN(S) R/C

Table with columns: CULTURES REQUESTED, NEGATIVE RESULT, DIRECT MICROSCOPIC EXAMINATION. Includes checkboxes for Salmonella, Shigella, Yersinia, Aeromonas, Campylobacter, etc.

ORGANISMS IDENTIFIED

Handwritten notes: 3/15 Scant Shigella flexneri, 2+ Campylobacter coli, 3/18 Growth from broth after 3 days cold enrichment of Yersinia pseudotuberculosis, negative for Aeromonas & Salmonella

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

Sensitivity table with columns for various antibiotics (Amikacin, Ampicillin, Augmentin, etc.) and handwritten 'S' for susceptible.

COMMENTS:

REPORTED BY:

REPORT DATE: 3/18/99

CLINICAL MICROBIOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinical Pathology