

University of Montevallo
Protocol for Animal Care and Use
Ethical Compliance Statement: Animal Subjects

Protocol B: This form is applicable to IACUC-reviewed research involving species covered by the Animal Welfare Act of 1973 (revised 1985) *and/or* invasive procedures.

All University-related research must be reviewed by the Human and Animal Research Subjects Committee (HASRC) prior to the initiation of the study. For more information, see Guidelines for the Review of Research With Animal Subjects. **Federal regulations require that all research funded by NIH or NSF, or involving species covered by the Animal Welfare Act of 1973 be reviewed by an Institutional Animal Care and Use Committee (IACUC).** At the University of Montevallo, the HASRC is also the IACUC. (IACUC-exempt species are: invertebrates, rats of the genus Rattus, mice of the genus Mus, reptiles, amphibians, fish, and poultry.) *The HASRC / IACUC must* review and approve the study before the initiation of any research involving living organisms. If your research involves IACUC-exempt organisms, contact John Burling, Chair, HASRC at Station 6440 to obtain the appropriate form for review of your proposed research.

Note: If your research requires maintenance of animals for more than 24 hours that **are not** IACUC-exempt, USDA certification of the research site will be necessary. In addition, periodic inspections of the site by USDA officials will occur to assure compliance with federal regulations. Please plan for the additional time needed to meet federal regulations if your study requires USDA certification.

Will the proposed study require maintenance of animal subjects for more than 24 hours? ____yes
____no

Please type or print:

1. **Title of project:** _____

2. **Principal investigator/course director:**

Name and Title: _____

Department: _____

Office phone: _____

Emergency phone: _____

3. **Other responsible persons:**

<u>Name</u>	<u>Responsibility</u>	<u>Offc. phone</u>	<u>Emergency phone</u>
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____

4. Protocol status: _____ New _____ Modification _____ Continuation
_____ Research _____ Teaching _____ Exhibition

5. Start date: _____ Anticipated completion date _____

6. Funding source: _____ Department _____ Other intramural source _____
Extramural, Specify source: _____

7. WILL THE PROJECT OR EXERCISE INVOLVE EXPOSURE OF ANIMALS OR ANIMAL HANDLERS TO ANY CHEMICALS OR OTHER SUBSTANCES? _____ YES
_____ NO

IF YES: A. PLEASE LIST ALL CHEMICALS AND SUBSTANCES TO BE USED (use attachments as needed throughout the remainder of this form):

B. SPECIFY AMOUNTS TO BE USED FOR EACH CHEMICAL AND SUBSTANCE:

C. ATTACH A DETAILED DESCRIPTION OF PROCEDURES AND SAFETY PRECAUTIONS.

8. CHECK ALL ITEMS WHICH APPLY TO THIS PROJECT:

- BLOOD AND/OR TISSUE COLLECTION
- SURVIVAL SURGERY
- ANTIBODY PRODUCTION & COLLECTION
- NON-SURVIVAL SURGERY
- BEHAVIORAL STUDIES
- ASEPTIC SURGERY
- PROLONGED PHYSICAL RESTRAINT
- MULTIPLE SURGERIES ON SAME ANIMAL
- FOOD / WATER DEPRIVATION
- ENVIRONMENTAL EXTREMES
- ALLEVIATED PAIN
- ELECTRICAL STIMULI
- UNALLEVIATED PAIN
- INDUCTION OF TRAUMA
- ANESTHETICS USED
- WORK TO BE DONE OFF CAMPUS
- IMMOBILIZING AGENTS WITHOUT ANESTHESIA
- FIELD STUDIES

9. ANIMAL REQUIREMENTS

SPECIES: _____

STRAIN: _____

SEX: _____

AGE: _____

TOTAL NUMBER TO BE

USED: _____

DURATION OF

STUDY: _____

10. IS SURGERY INVOLVED IN THE PROPOSED PROJECT?

____NO ____YES. *IF SURGERY IS INVOLVED, PLEASE ATTACH A DETAILED DESCRIPTION OF PROCEDURES TO BE UTILIZED.*

11. ARE STRESSFUL OR PAINFUL PROCEDURES, *OTHER THAN SURGERY*, PART OF THIS PROJECT?

____NO ____YES. *IF YES, PLEASE ATTACH A DETAILED DESCRIPTION OF THE PROCEDURES TO BE UTILIZED.*

12. ARE PROLONGED (MORE THAN A FEW HOURS) PHYSICAL RESTRAINT PROCEDURES PART OF THIS PROJECT? ____NO ____YES. *IF YES, PLEASE ATTACH A DETAILED DESCRIPTION OF THE PROCEDURES TO BE UTILIZED.*

13. WILL ANIMALS BE EUTHANIZED? ____NO ____YES. *IF YES, LIST THE METHOD(S) AND IF APPLICABLE, THE DOSE AND ROUTE OF ADMINISTRATION.*

14. WILL THE ANIMALS BE ALIVE AT THE END OF THE PROJECT?

____NO ____YES. *IF YES, WHAT WILL THE FINAL DISPOSITION OF THE RESEARCH ANIMALS BE?*

15. RESEARCH OR TEACHING PLAN: IN SUFFICIENT DETAIL TO PERMIT EVALUATION BY MEMBERS OF THE HUMAN AND ANIMAL RESEARCH SUBJECTS COMMITTEE, ANSWER THE FOLLOWING QUESTIONS: (ATTACH ADDITIONAL SHEETS AS NEEDED)

a. What is (are) the objective(s) and potential significance of the activities involving animal use?

b. Specifically, why are live animals required for this project rather than non-animal alternatives?

c. In accordance with the requirements of the Animal Welfare Act (section 2.31 (d)(1)(II), please list what alternatives you considered using, how you determined that they are not suitable nor that other alternatives are not available, and your sources of information about the availability of alternatives.

d. Why is (are) the animal model(s) you are proposing to use the most appropriate model(s) for achieving the objectives of this project?

e. What are the reasons for requiring the number of animals requested?

f. What are the specific procedures you are proposing to use that will involve or affect the animals?

16. CHECK ALL APPLICABLE ITEMS:

**A. INSTRUCTIONS FOR DISPOSITION
OF SICK OR INJURED ANIMALS**

CALL INVESTIGATOR

VETERINARIAN TO TREAT

EUTHANIZE OTHER (DESCRIBE)

B. INSTRUCTIONS FOR

OF DEAD ANIMALS

CALL INVESTIGATOR

OTHER (DESCRIBE)

17. IF WILD OR EXOTIC SPECIES ARE TO BE USED:

ARE SPECIAL PERMITS REQUIRED? NO YES. IF YES, PLEASE FORWARD A COPY OF APPLICABLE PERMITS OR PERMIT APPLICATIONS.

18. WILL WILD ANIMALS BE OBSERVED, MANIPULATED, OR TRAPPED IN THE WILD? NO YES. IF YES, AND THEY HAVE NOT ALREADY BEEN ADDRESSED, DESCRIBE THE FIELD PROCEDURE(S) AND GIVE THE GEOGRAPHIC LOCATIONS INVOLVED.

19. WILL ANY NONANESTHETIC SUBSTANCES BE INTRODUCED INTO THE ANIMALS AS PART OF THIS PROJECT (E.G., PHARMACOLOGICAL OR TOXICOLOGIC AGENTS, ANTIGENS, HORMONES, TUMOR CELLS, ETC.)?

NO YES. IF YES, DESCRIBE IN DETAIL:

20. WILL BLOOD OR TISSUES BE COLLECTED FROM THE ANIMALS OTHER THAN DURING TERMINAL ANESTHESIA PROCEDURES? NO YES. IF YES, DESCRIBE THE TECHNIQUES TO BE USED:

21. IF BLOOD IS TO BE COLLECTED REPEATEDLY, WHAT IS THE QUANTITY OF BLOOD TO BE COLLECTED AT EACH DRAW? _____. HOW OFTEN WILL BLOOD SAMPLES BE COLLECTED? _____, AND WHAT PROCEDURES, IF ANY, WILL BE USED TO PREVENT ANEMIA?

22. ARE BEHAVIORAL STUDIES INVOLVED IN THIS PROJECT? NO YES. IF YES, AND NOT PREVIOUSLY DESCRIBED, PROVIDE A DESCRIPTION OF ALL METHODS AND PROCEDURES TO BE USED, OR WITH, THE ANIMALS (INCLUDING ANY NUTRITIONAL DEPRIVATION OR APPLICATION OF NOXIOUS STIMULI) AND INDICATE THE DURATION OF SUCH STUDIES:

