**IACUC Use Only**

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|---|---|---|---|
| Date Received by IACUC: | | Date of Approval: | |
| Species: | | Expiration Date: | |

**A**

**NOTE TO ALL PRINCIPAL INVESTIGATORS**: All submissions require Form A. Complete Form B only if relevant. Please fill-in all necessary information and provide a signed original and 1 electronic copy to the IACUC committee chair. Failure to do so may cause significant delays in the review and approval process. Questions concerning how to complete various sections should be addressed (via email) to the IACUC committee chair, Dr. Heather Zimbler-DeLorenzo (zimbler@alfred.edu). Do not refer to or add additional pages in this form.

**FORM A: ANIMAL CARE AND USE SUMMARY**

| | | | | |
|---|---|---|---|---|
| **1.** | **Principal Investigator:** | | **Department:** | |
| | **Telephone:** | | **Email:** | |

**2. Title of Proposal:** _____

**3. Type of project. Indicate only the most appropriate category.**

___ **Teaching (Indicate Course):**
___ **New Research Project**
___ **Renewal Research Project**

**4. Provide a description of the specific aims of the project in language that a member of the general public can understand. It is important to indicate how the project benefits humans and/or animals. Please keep to 100 words or less.**

**5. Use of Vertebrate Animals.**

**a. Describe why it is necessary to use animals to obtain your research goals.**

**b. Rationale for <u>each</u> species, stock/strain of animal proposed:**

**6. Animal Numbers and Use Category for the duration of your project (up to 3 years). For <u>each</u> species of animals listed in 5.b. above, indicate the estimated number of animals required for <u>each</u> year of your proposal. Also, for each year indicated the number of animals estimated in each animal use category (C, D, or E) as well as a brief descriptive phrase of animal use in each category. To assist you in selecting the appropriate animal use category, definitions for each category as well as examples and decision tree are given at the end of this form.**

**a. Species:**

**Year 1:**

| Use Category | # Animals | Animal Use Description |
|---|---|---|
| C | | |
| D | | |
| E | | |

**Total Animals for Year 1:** ☐

**Year 2:**

| Use Category | Number of Animals | Animal Use Description |
|---|---|---|
| C | | |
| D | | |
| E | | |

**Total Animals for Year 2:** ☐

**Year 3:**

| Use Category | Number of Animals | Animal Use Description |
|---|---|---|
| C | | |
| D | | |
| E | | |

**Total Animals for Year 3:** ☐

**Total Animals to be used:** ☐

**7. Justify the numbers of <u>each</u> species of animals to be used. Federal regulations require assurance that: 1) a sufficient number of animals is used to satisfactorily answer the scientific questions posed, and 2) an excessive number of animals not be used. When appropriate, provide an estimation of the sample size (power analysis) needed to reach an appropriate level of statistical significance for your study.**

**8. Will recovery surgery be performed?** ☐ **No;** ☐ **Yes.**

**If yes, submit Form B along with Form A to IACUC. If no, do <u>not</u> submit Form B. Complete a separate Form B for <u>each</u> species.**

**9. Will Infectious agents, hazardous substances, or radionuclides be used?** ☐ **No;** ☐ **Yes.**

**If yes, a separate form (C) will be provided to you by IACUC. This section will need to be completed and reviewed by IACUC and the Institutional Biosafety Committee before approval will be granted. If one has a question about whether a substance is potentially hazardous and needs review, contact the IACUC chair for clarification.**

**10. Describe in detail how the animals will be cared for and treated (including food/water scheduling, housing, maintenance, behavioral observation, specimen collection, etc.).**

Housing:

Food/Water:

| |
|---|
| Behavioral Testing:<br><br>Specimen Collection:<br><br>Disposal of Animals at the End of Project:<br><br>Other: |

**11. Animal euthanasia:**

**a. Describe euthanasia method(s) to be used. Specify the physical technique or chemical agent, dose, and route. Any method that is not recommended by the 2000 Report of the AVMA Panel on Euthanasia (JAVMA, 2128(5):669, Mar 1, 2001) must be scientifically justified (e.g., decapitation or cervical dislocation of rodents without prior sedation).**

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**b. Indicate measures taken to ensure that laboratory animals are dead at the completion of experiments.**

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**12. Where are living animals to be housed? List building and room number for each species. How long do you anticipate keeping them there? Which (if any) surgical or other manipulations will be performed there? If surgery or manipulation of living animals will be performed elsewhere, please describe that location.**

| Species | Building | Room Number | Length of time in facility | Manipulations (Surgical or Other) | Description of Room (if another location) |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |

**13. Identify all personnel working with living animals. Start with the principal investigator. Also, if you have any order of preference of persons to contact in case of emergency, please stipulate.**

| Name | Title | Department | AU Phone | Non-AU Phone |
|---|---|---|---|---|
| | | | | |
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**14. Please give a brief summary of the practical training or experience of each of the personnel listed in item 13 that qualifies them to perform the specific procedures that they will perform in this protocol. Please indicate the kinds of procedures performed by each person.**

| Name | Experience | Procedures |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

**I certify that the animals used in this study are used in accordance with regulations and standards as promulgated by the New York State Health Department, the United States Department of Agriculture, the Public Health Service and Alfred University. Moreover, I certify that pain or discomfort to animals will be limited to that which is unavoidable in the conduct of scientifically valuable research. To the best of my knowledge, the studies proposed do not unnecessarily duplicate any others in the published literature. In addition, I certify that the use of *in vitro*, less invasive or painful, or other alternative techniques to the use of animals, as described, have been considered. I have concluded that the species, numbers, and procedures to be use are the most appropriate for the proposed investigation.**

**Date:** _____

**Signature of Principal Investigator**

**FOR YOUR USE. DO NOT SUBMIT**

## ANIMAL USE CATEGORIES, DEFINITIONS AND EXAMPLES

**Category C:** ***Animals that will not experience pain, discomfort, or distress.***

- **Euthanasia using AVMA approved methods (including general anesthesia followed immediately by cervical dislocation or decapitation) for purposes of harvesting tissue, with or without fixation, in-situ.**
- **Behavioral observations.**
- **Natural breeding.**
- **Venipuncture for blood collection.**
- **Routine injections of non-toxic substances by IV, IP, SubQ, ID or IM routes.**
- **Genotyping using tail-snip without anesthesia (using the vivarium SOP) in preweanling mice only.**
- **Identification by ear punch or toe clip without anesthesia (using the vivarium SOP) in preweanling mice only.**
- **Tube feeding or gavage.**
- **Studies which use positive reinforcement or scheduled feeding or watering.**
- **Use of aversive stimuli that are mild, of limited duration, and can be avoided by the animal**

**Category D:** ***Animals that may experience pain, discomfort or distress but will be administered appropriate anesthetic, analgesic or tranquilizing drug to alleviate these effects.***

- **All major or minor recovery surgery.**
- **Procedures for which anesthesia or sedation is used, except euthanasia described in C above.**
- **Implantation of mini-osmotic pumps.**
- **Retrobulbar blood collection and intraocular injections under sedation, using DLAM procedures.**
- **Non-recovery surgical experiments (i.e.. assessing organ function followed by euthanasia).**
- **Tumor studies or monoclonal and polyclonal antibody production, but only if using standard UCAR Protocols.**
- **Cervical dislocation or decapitation without the use of sedative, anesthetic or tranquilizing drugs as described in AVMA 2000 (http://www.avma.org/resources/euthanasia.pdf). Provide evidence that this method of euthanasia is scientifically justified, and that it will be done by specifically trained personnel using appropriate techniques and equipment.**

**Category E*:** ***Animals will experience pain, discomfort or distress for which anesthetics, analgesics or tranquilizing drugs would customarily be given but will not be administered because their use would adversely affect the interpretation of experimental results or interpretation.***

- **Tumor studies in which subjects exceed standard UCAR "end-points."**
- **Retrobulbar blood collection without sedation. Provide evidence that this procedure is scientifically justified and that it will be done by specifically trained personnel using appropriate technique.**
- **Exposure to radiation that produces clinical illness.**
- **Use of aversive stimuli that are unavoidable, such as inescapable electric shock or exposure to environmental extremes.**
- **Death as an endpoint.**

***Note: Federal regulations require that experiments conducted that are in this category must be specifically reported in the University's Annual Report to the United States Department of Agriculture. The Report must include the species, numbers and brief explanation of the scientific justification.**