ALABAMA STATE UNIVERSITY

Institutional Animal Care and Use Committee (IACUC)

APPLICATION FOR VERTEBRATE ANIMAL USE

ID#_____(Committee Use Only)

Title of project:

Submitted to: _____Agency
(Name of Funding Agency, if applicable)
Deadline: _____

This is a renewal application. If this application is a Renewal of a project previously approved by the Committee, please indicate the ID# of the previous application: _____

DO NOT WRITE BELOW THIS LINE. APPLICATION CONTINUES ON NEXT PAGE._____

Please retain a copy and, AS APPROPRIATE, submit a copy with your application to various University offices through which applications must be routed, or send a copy directly to the review group or project officer in the Funding Agency for your project.

Date of Review: _____

_____Approved _____Approved with modification (Attached) _____Not Approved

This institution has an Animal Welfare Assurance on file with OPRR (#A3069-01-01).

Associate Provost for Research and Sponsored Programs

EXPIRATION DATE: _____

CONFIDENTIAL

INFORMATION ON PAGES 2 AND 3 IS CONSIDERED PRIVATE AND NOT SUBJECT TO RELEASE UNDER THE PUBLIC RECORDS ACT. PLEASE PROVIDE THE APPROPRIATE INFORMATION IN THE SPACES PROVIDED BELOW, BUT DO NOT INCLUDE THIS INFORMATION IN ANY OTHER PORTION OF THE APPLICATION. THE REST OF THE APPLICATION IS CONSIDERED PUBLIC AND IS SUBJECT TO RELEASE.

Principal Investigator_____ Phone Number_____
Department_____ Box Number_____
E-mail address: _____ Fax Number_____

Lab Contact (Technician) and phone number: _____

After-hours emergency contact and phone number:

1) a. Will animals be housed? _____Yes _____NO
   If no, explain why not (i.e. field studies, client owned). For field studies, give location. Be specific.

   b. Where will animals be housed?
   Animal Facility Name: Room Number (if known):
   c. Where will procedures (including surgeries) be performed? Include building and room number.

   d. Will animals be maintained at any time in Investigator's lab or any off-campus site?
   ____Yes _____No
   If yes, how long? _____Building _____Room Number
   If greater than 12 hours, state justification. These facilities must be approved by the IACUC

   e. For animals that are transported away from the animal facility to an investigator's lab or to any off-campus site, describe containment of animals and method of transport.

2) List all personnel in your research group who will care for and work with the animals. For each person, indicate their role in the project and list animal-related experience and training, for procedures being performed, in sufficient detail to allow the IACUC to determine the individuals are qualified. The listing of degrees is not sufficient. Provide

specific information for those performing euthanasia, and if applicable, for those performing anesthesia and/or surgery. Indicate who will be working under the direct (in-lab) supervision of a trained individual and who will be working unsupervised.

FOR SECTION G(Animal use categories D and E)

3) If applicable, list experts in the area of investigation with whom you have consulted. Provide name, position, and briefly describe area of expertise:

PRINCIPAL INVESTIGATOR ASSURES:

- **That she/he will abide by Alabama State University policies for the care and use of animals: the provisions of the ILAR Guide for the Care and Use of Laboratory Animals: and all federal, state and local laws and regulations governing the use of animals in research; and that he/she understands that emergency veterinary care will be administered to animals showing evidence of pain or illness, in addition to routine veterinary care as prescribed for individual species in the Standard Operating Procedures;**

- **That all manipulation involving live animals will be performed under her/his supervision or that of another qualified individual listed on this protocol;**

- **That all personnel having direct animal contact, including the investigator, have been trained in humane and scientifically acceptable procedures in animal handling, administration of anesthetics, analgesic, and euthanasia to be used in this project, and are under the direct (in-lab) supervision of a trained individual; and that employees will be allowed adequate time to attend training sessions;**

- **That all personnel having direct animal contact, including the investigator, have been trained in humane and scientifically acceptable procedures in animal handling, administration of anesthetics, analgesics, and euthanasia to be used in this project, and are under the direct (in-lab) supervision of a trained individual; and that employees will be allowed adequate time to attend training sessions;**

- **That personnel with animal or animal tissue contact are required to participate in the Occupation Health and Safety Program;**

- **That this proposed with animal or animal tissue contact are required to participate in the Occupational Health and Safety Program;**

- **That this proposed animal use do not unnecessarily duplicate previous activities;**

- **That she/he will obtain approval from the IACUC before initiating any changes in this study, including changes in personnel or location of animal use;**

- **That she/he will notify the IACUC and the attending veterinarian regarding any unexpected study results that adversely impact the animals, including any unanticipated pain or distress, morbidity or mortality.**

I have read, understand, and will comply with the assurance statements.

Signature of
P.I._____Date_____
_____

Any deviation from an approved protocol or violations of pertinent policies, guidelines or laws could result in immediate suspension of this project.

SECTION A. ANIMAL CARE and USE (Completion of this section is required for all applications)

1. Describe in non-scientific terms the purpose and importance of this animal use activity.

2. Describe in non-scientific terms how animals will be used. Include all manipulations and procedures. This description should allow the IACUC to understand the experimental course of an animal from its entry into the experiment to the endpoint of the study.

3. What is the rationale for using animals for this activity?

4. Describe the appropriateness of the species to be used.

5. Provide the following information for all animals. No animals should be listed more than once: count each in highest proposed category of use.

Species and strain (include common name)*	age and/or weight**	Source***	Category of use****	total number requested for 3 years

*For field studies involving capture methods, anticipated non-target (by catch) species should also be indicated by species or in aggregate as "miscellaneous."

**Give ranges if the specific information is unknown.

***Please choose from the following sources: commercial vendor, client-owned (teaching hospital, non-university farms), random source, university-owned teaching and research herds or flocks, rental or stock animals, purpose-bred, collected from wild, animals in natural habitat, other (define). DO NOT USE VENDOR OR COLLABORATOR NAMES.

b. Is this laboratory exercise for purposes of teaching students? _____Yes _____No

c. Do you have data from prior studies that is sufficient to calculate the sample size?
_____Yes _____No

d. How did you determine the number of animals to be used in this study?
_____PI's decision (no outside resources)
_____Contractual Agreement with Grantor

_____Other. Please specify:

SECTION B. Invasive sample collection from live animals (blood/urine/feces/tissue/other {define})

Species	Sample frequency of collection	site(s) of sample collection	method(s)	volume(s)

SECTION C. Substance Administration

Anesthetics, analgesics, tranquilizers and euthanasia agents should be listed in Section D and F.

1. Will anything be administered to animals? _____YES _____NO. If yes, list specific agents below.

   _____Radioisotopes? List:

   _____Pathogenic or viable organisms? List:

   _____Toxic chemicals? List:

   _____Carcinogens? List:

   _____*Transplantable tumors? List:

   _____ Biological materials such as tissue, sera, or cell lines? List:

   _____*Others not listed above?

   *If materials have been derived or passed through rodent species, product must be free of infectious agents (Mouse Antibody Production [MAP]/Rat Antibody Production [RAP]/Hamster Antibody Production [HAP] testing are diagnostic assays used as indicators of viral contamination of rodent products).

2. For each of the above, describe in detail the precautions taken to protect people and animals in the environment, including handling practices for contaminated excreta, bedding and toxic metabolites.

3. Describe the effects of these agents on the experimental animal. Potential for pain or distress should be addressed in Section D.

4. Safety plan approved by ASU Environmental Health and Safety?
   _____Yes #_____ No____

   Radiological approval needed?

_____Yes#_____ No____

SECTION D. Potential Pain and Distress

1. **Painful or distressful procedures or conditions NOT relieved with anesthesia, analgesia, tranquilization, or other palliative therapies:**
   a. List each procedure or condition with potential for accompanying pain or distress, and give the species and number of animals affected. Provide justification for not using anesthetics, analgesics, tranquilizers, or other palliative therapies.

   b. The level of pain and distress must be minimized. Describe the monitoring plan for pain and distress (including frequency and duration of checking for morbidity and morbidity), the actions to be taken, and the specific criteria for euthanasia.

   c. If death is intended to serve as an experimental endpoint, provide scientific justification.

2. **Painful or distressful procedures or conditions relieved with anesthesia, analgesia, tranquilization, or other palliative therapies:**
   a. For each species to be used, list procedure or condition in which anesthesia, analgesia, tranquilization or other palliative therapies will be used. Provide drug, dose, route, frequency of administration, and anticipated duration of therapeutic effect. Include all medications, such as pre-and post-anesthetics, antibiotics, paralytics, etc. (If applicable, describe surgery in next section.)

   b. Describe monitoring procedures to ensure adequacy and safety of anesthesia.

   c. Describe monitoring procedures for recovery from anesthesia.

   d. How will adequacy of post-operative/post-procedural analgesia or other pain-relieving therapies be ensured?

3. **Physical restraint (more than 1 hour):** Describe physical restraint methods. How will potential distress be minimized (e.g. sedation, acclimation/training)? **Trapping**

or other capture methods used in field studies for any amount of time must be explained here.

4. **Exceptions to Standards:** Describe and justify any exceptions to federal regulations or standards, and give the species of animal and number to be used. (Examples of exceptions: use of an animal in more than one protocol involving a major operative procedure from which it is allowed to recover; deprivation of food or water; maintaining animals at temperatures and/or humidities outside the ranges specified by the standards; not cleaning and/or sanitizing at required frequencies; not providing diurnal lighting as required; not meeting space requirements; exceptions from the exercise plan for dogs.)

No exceptions. IACUC guidelines will be followed strictly.

SECTION E. Surgery

Surgery and postoperative monitoring and records must be in accordance with IACUC guidelines. Refer to the IACUC Guidelines on Intra and Post Operative Monitoring and Record Keeping.

1. Will surgery be survival or non-survival?
____Survival ____Non-Survival (animal does not recover from anesthesia prior to euthanasia)

2. If the animal will recover from anesthesia, how long will the animal be maintained after recovery?

3. Describe surgical procedure(s) for each species to be used. Include description of presurgical preparation and method of closure.

4. Describe postoperative care, including any specialized care. (Use of analgesics should be described in Section D, above. Personnel responsible for providing postoperative care should be listed in confidential section, number 2.)

5. Will individual animals undergo more than one surgical procedure? _____Yes _____No
   If yes, provide scientific justification. (Multiple major survival surgeries should be justified in Section D, number 4.)

SECTION F. Euthanasia/Disposition

1. Even though euthanasia may not be planned for a particular protocol, the IACUC requires a contingency plan for all protocols in the event that it becomes necessary. Death must be confirmed.

Species	method/agent	dosage, route

2. Justify methods that vary from those recommended by the most recent report of the American Veterinary Medical Association Panel on Euthanasia. Decapitation and cervical dislocation require justification.

3. If these animals are not to be euthanized as part of your protocol, what will become of them?

SECTION G. Consideration of Alternatives

Are there procedures or conditions that may potentially cause more than momentary or slight pain or distress? If yes, there must be a written narrative description of the methods and sources (e.g. biological abstracts, Index Medicus, Current Research Information Service, and/or the Animal Welfare Information Center operated by the National Agricultural Library (phone 301/504-6212) which were consulted to determine the availability of alternatives (reduction, refinements, replacement).

"Alternative" refers to methods, models, and approaches that result in the reduction of the number of animals used, that incorporate refinements of procedures which result in the lessening of pain or distress to animals, or that provide for the replacement of animals with non-whole animal systems or the replacement of one animal species with another, particularly if the substituted species is non-mammalian or invertebrate.

1. Literature search for alternatives: list the databases, years searched in each database, keywords used, and date the search was performed (or attach the summary sheet with this information).

2. Other information services utilized (list):

3. Other methods or sources used (briefly describe). Names of consultants should be listed in the confidential section of this application, item number 3.

4. Summarize how the above methods and sources have helped you identify alternatives or determine that alternatives are not available.