



State University of New York at
Fredonia
Institutional Animal Care
and Use Committee (IACUC)
ANIMAL USE PROTOCOL -
COVER SHEET (2/02/16)

For ORS Use Protocol# _____
Date Approved _____

Principal Investigator		Department	Ext: E-mail:
Co-Investigator		Department	Ext: E-mail:
TITLE OF PROTOCOL:			
Type of Protocol: ___ Research ___ Instructional			
Species:		Age:	Size:
No.	No.	Source/Supplier:	

PROJECTED DURATION OF PROJECT _____

INVESTIGATOR'S ASSURANCES:

I am familiar with those aspects of the *2011 Guide for the Care and Use of Laboratory Animals* and/or the *Animal Welfare Act* that pertain to this research or instructional protocol and further certify that this protocol does not represent or include unnecessary duplication of previous research or instructional use of animals.

I am familiar with all procedures of the animal facilities, and I am familiar with the safety guidelines as set forth in the IACUC Policies for Fredonia.

I understand that it is my responsibility to assure daily monitoring and record keeping for all animals under this protocol.

I certify that all students and research technicians/assistants caring for animals and/or performing procedures under this protocol will receive complete training via CITI for broad training and specific procedure training from the PI or veterinarian. The training form(s) will be filed with the Office of Sponsored Programs. No student or research technician/assistant may perform invasive procedures without supervision until fully certified.

I will notify the IACUC, in writing, if animals purchased for this protocol are transferred to another investigator for use in a different protocol.

Signature of Principal Investigator

Date

Signature of Co-Investigator

Date

Fredonia
Institutional Animal Care and Use Committee (IACUC)

**ANIMAL USE PROTOCOL
INSTRUCTIONS (02/02/16)**

*Please carefully read these instructions prior to completing your protocol. Be sure to follow the outline and address each item. **Submit the Cover Sheet and Protocol Narrative electronically as an MSWord e-mail attachment** to paul.benson@fredonia.edu and send one signed copy of the Cover Sheet to the Office of Sponsored Programs, E230 Thompson Hall, at least one week prior to a scheduled meeting.*

An outline for the Narrative follows the cover sheet form for your convenience.

1. Name of investigator(s) and Title of Protocol

Investigator:

Title:

2. Brief Project Description. (use as many additional pages as needed)

Provide a description the purpose of your research or instructional project and the experimental design in "layperson's" terms so that it is easily understood by IACUC members who are not in your academic discipline.

3. Project Design and Methodology

3.1. Purpose and objectives

What do you plan to accomplish? Why?

3.2. Rationale for choice of animal species; alternative methods explored

Why are animal subjects, and this species in particular, required for the research or instruction? Clearly and completely explain why your research or instructional goals cannot be met using alternative approaches, e.g., simpler species, tissue culture, computer models, video, or written materials.

3.3. Rationale for numbers of animals

Why is this number of animal subjects required? Describe your statistical methodology.

3.4. Duplication of research or instructional use? yes no If yes, justify.

How have you determined that this project is not unnecessary duplication, e.g., bibliographic searches? If it is duplication of previous research or instruction, why is it required?

3.5. Detailed description of procedures

Provide a clear, step-by-step description of all procedures including details of methods of anesthesia. IACUC reviewers should be able to track the animals through the protocol. A flow chart is recommended.

If the animals are to be sacrificed at the end of the protocol, give details of the method by which they will be euthanized. (Ref: 2007 Report of the AVMA Panel on Euthanasia). If the animals will not be sacrificed, what do you plan to do with them?

If the protocol includes invasive survival surgery procedures, you must include a detailed description of the following: (1) pre-operative care, including special diets, (2) surgical preparation, (3) anesthesia, (4) surgical techniques and procedures, and (5) post-operative care and handling, including analgesics, antibiotics, and special diets.

3.6. Competency in techniques to be used in the protocol

Are you competent in the techniques involved in this proposal? If not, how will you acquire the necessary expertise? Ref: Policy and Procedure, Training in Techniques Required for a Protocol

3.7. Procedures to minimize pain/distress [A rule of thumb definition of pain and distress- if the procedure would be painful to a human or if it requires anesthetic or sedation, e.g. surgery or cardiac puncture.]

Describe procedures to minimize pain and/or distress. How will anesthesia or euthanasia be administered? What is route of injections?

3.8. **If animal subjects may become ill as a result of the procedures**, what are the parameters for determining intervention, e.g., medication or euthanasia. What are the anticipated interventions? What is the time frame for determining the type or length of intervention? Ill or injured animals must be monitored on a regular basis and documented on the Quarantined Animal Record.

4. Animal Maintenance

4.1. **Location and duration of housing.**

Where will the animal be housed and for how long? Purchase orders for animals to be housed in Jewett Hall must be signed by the facilities director or designee.

4.2. **Special Requirements/instructions**

Describe any special requirements, e.g., special housing, diet, extra cage cleaning, light, temperature, or humidity. It is the responsibility of the investigator to provide for special requirements in the maintenance of animals. The Animal Caretaker is not authorized to provide special maintenance services or research assistance.

5. **Other investigators, students or research technicians/assistants.**

Provide a list of all others who will work on the protocol, including levels of expertise and limits on duties or procedures. The following forms must be completed and filed with the Office of Sponsored Programs:

- IACUC Student/Research Assistant Training Certification (CITI)
- IACUC Training in Techniques Required for a Protocol Certification

6. **External funding sources.** If this protocol is related to a proposal which has been or will be submitted for external funding, list the agency, source, and proposal status.

Date Approved: _____
