

# Animal Use Protocol Form – Research THE EVERGREEN STATE COLLEGE

**(NOTE: Form must be submitted by the 1<sup>st</sup> of any month to be considered by the IACUC that month)  
PROTOCOLS FORMS ARE GENERALLY NOT REVIEWED IN AUGUST**

<b>Principal Investigator:</b>		<b>Date of submission:</b>	
Department:		Phone:	
E-mail:		FAX:	
Co-investigators:			
Collaborating scientists (including postdocs, visitors, etc.) include institution or address & phone number			
Students:			
Technicians:			
Facility in which animals will be housed:			
Anticipated start date:		Anticipated completion date:	
Project title:			
Is this protocol included in a grant proposal?		Yes:	No:
If yes, who is sponsor?      NIH:      NSF:      USDA:      Other (specify):			
ORAA Proposal ID number (if known):			

***I acknowledge responsibility for the conduct of these procedures with animals. I attest to the accuracy and completeness of the information provided. I promise to conduct this work with animals in accordance with the protocol as approved by the IACUC and the Campus Animal Care and Use Guidelines. I will not make any changes in the above protocol without first obtaining the approval of the IACUC and I will not use any procedures which are not included in this form.***

	Printed Name	Signature	Date
<b>Investigator:</b>			
<b>Supporting Signatures</b>			
<b>Facility Supervisor</b>			

**Before completing this and the subsequent sections of the protocol form you should familiarize yourselves with the material described in Section IV below.**

## SECTION II

If the animal procedures planned involve simple field observations with *NO IMPACT ON EITHER THE ANIMALS OR THEIR ENVIRONMENT* then continue here. Otherwise, skip to section III.

- a. **Lay summary:** On a separate sheet, provide a 1-2 paragraph overview of the proposed research in terms understandable by a non-scientist. Include an explanation of research goals, rationale for animal research, and how this work will benefit society and knowledge. Do not include undefined scientific terms. Since this summary may be made available to the public if requested, it is imperative that you carefully consider its content.
- b. In more scientific terms, describe the study activities. Include all precautions taken to ensure no adverse impact on the study animals or their environment.
- c. Include copies of all required permits and/or letters of permission, or provide documentation that such permits are not required.
- d. You should sign and submit this form, You do *not* need to complete Sections III and IV..

## SECTION III

**ANSWER ALL QUESTIONS AS INDICATED (circle the appropriate answer)**

1. Does this research duplicate previous experiments? (If YES, justify on separate page)	<input type="checkbox"/> NO	<input type="checkbox"/> YES
2a. Will the animals be euthanized at the end of the experiment?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
2b. Method of euthanasia		
3a. Is surgery to be performed? (If yes, complete items 3b to 3d and add surgical SOP=s as appropriate.)	<input type="checkbox"/> NO	<input type="checkbox"/> YES
3b. Surgery room (building and room number):		
3c. Is the surgical procedure terminal?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
3d. Is the surgical procedure a survival procedure?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
4a. Have the husbandry SOP=s been approved by the IACUC?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
4b. If you answered No@ in item 4a, on a separate page please explain why not and describe the procedures to be used.		
5a. Are infectious agents to be used:(SEE 6E)	<input type="checkbox"/> NO	<input type="checkbox"/> YES
The agent is (are):?		
5b. Are chemical hazards to be used?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
The chemical hazards are?		
5c. Are radioisotopes to be used?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
The radioisotopes are?		
5d. Are other biohazards (including recombinants) being used?	<input type="checkbox"/> NO	<input type="checkbox"/> YES
The biohazards are?		
5e. If answers to any part of questions 4 or 5 is YES, IACUC approval is contingent upon IACUC receipt of written approval of your procedures by the Office of Environmental Health and Safety.		

**SECTION IV. ANSWER EACH OF THE FOLLOWING QUESTIONS ON A SEPARATE SHEET(S) OF PAPER. PLEASE BE SURE AND USE THE APPROPRIATE NUMBER FOR EACH QUESTION.**

6. **Lay summary:** Provide a 1-2 paragraph overview of the proposed research in terms understandable by a non-scientist. Include an explanation of research goals, rationale for animal research, and how this work will benefit society and knowledge. Do not include undefined scientific terms. Since this summary may be made available to the public if requested, it is imperative that you carefully consider its content.
7. **Research Goals:**  
A. What are the scientific issues addressed by the research?  
B. What are the specific goals of the animal studies described in this protocol?
8. **Alternatives:** Explain why animal studies are preferred to non-animal alternatives in achieving these research goals.
9. **Species:** Why is this the most appropriate species/strain to use in these studies?
10. **Design:** Summarize the experimental groups and the numbers of animals in each group. What is the basis for these numbers (statistical test, consultant, etc.)? These numbers should be easily tallied to reflect the numbers used in question 24. Clearly delineate those animals which are used more than once (in multiple experimental groups).
11. **Experimental Procedures:** Describe the animal procedures that are to be performed, detailing specifics of those procedures which impact the health and comfort of the study animals (e.g., frequency of performance of procedures, methods of restraint, blood sample volumes, needle sizes restrictions, etc.)
12. **Surgery:** If surgery is involved, described the surgical procedures to be performed. Include the procedures planned to ensure asepsis (e.g., surgical site preparation, instrument sterilization, etc.). If aseptic procedures are not being used, explain why not and describe the procedure(s) of choice. Finally, describe the immediate and post-operative (next day and thereafter) care.
13. **Anesthetic:** If any anesthetic is used, provide information on: (a) Anesthetic/analgesic to be used (types/names), (b) method(s) of administration, and (c) dosage(s) to be used.
14. **Investigator training:** Describe the training and qualifications of each person named in this protocol. Be specific about the hands-on training of those performing procedures that may cause animal discomfort (e.g., restraint, injections, blood collection, surgery, euthanasia, etc.). Include the status of all personnel with regard to required campus animal care training.

## SECTION V: PLEASE BE SURE AND REVIEW THE FOLLOWING INFORMATION

15. The Campus accepts only those euthanasia practices which are consistent with the recommendations in A1993 Report of the American Veterinary Medical Association (AMVA) Panel on Euthanasia.® Copies of this document are available thru Shane Peterson.
16. Definitions of research categories (See Question 24).
  - I. Little or momentary pain or discomfort (peripheral blood collection, injections, vaccinations, sedation, etc.).
  - II. Potential discomfort or pain which is relieved by the appropriate anesthetic or analgesic (surgery under anesthesia, cardiac puncture under anesthesia).
  - III. Discomfort or pain which is not relieved (toxicity studies, disease studies).
17. U.S. Government Principles for the Utilization and Care of Vertebrate Animals Used in Testing states the animals selected for a procedure should be of an appropriate species and quality and the minimum number required to obtain valid results.
18. The Animal Welfare Act states that: Procedures that may cause more than momentary or slight pain or distress to the animals will: a) Be performed with appropriate sedatives, analgesics or anesthetics unless withholding such agents is justified for scientific reasons, in writing, by the principal investigator and will continue for only the necessary period of time; b) Involve in their planning, consultation with the attending veterinarian..., c) Not include the use of paralytics without anesthesia...
19. The Animal Welfare Act states: The principal investigator has considered alternatives to procedures that may cause more than momentary or slight pain or distress to the animals, and have provided a written narrative description of the methods and sources, e.g., the Animal Welfare Information Center, used to determine that alternatives were not available.
20. Please remember that in discussing alternatives, we are considering the R's:
  - (A). Replacement: those methodologies (computer programs, tissue culture techniques, epidemiological data, etc.) which replace the use of animals.
  - (B). Reduction: Those methodologies which reduce the numbers of animals used in the protocol.
  - (C). Refinement: Those methodologies which refine the procedure to minimize the amount of discomfort that the animal may experience.
21. The U.S. Government Principles for the Utilization and Care of Vertebrate Animals Used in Testing, Research and Training includes: Procedures involving animals should be designed and performed with due consideration of their relevance to human or animal health, the advancement of knowledge or the good of society.
22. The Animal Welfare Act States: Activities that involve surgery include appropriate provision for pre-operative and post-operative care of the animals in accordance with established veterinary medical and nursing practices. All survival surgery will be performed using aseptic procedures, including gloves, masks, sterile instruments, and aseptic techniques.
23. The Animal Welfare Acts states: Personnel conducting procedures to the species being maintained or studied will be appropriately qualified and trained in those procedures.

24. Animal Number and Welfare Status: (Note, the numbers on this chart must equal those presented in the research description (for category definitions see Item 16).

<b>Species</b>	<b>Category I (Little or no pain, anesthetic may be used for sedation)</b>	<b>Category II (anesthetic used for relief of potential pain or distress)</b>	<b>Category III (Pain not relieved)</b>

For all animals in categories II and III, please fill in the following information

<b>Category</b>	<b>Databases searched &amp; Date</b>	<b>Inclusive dates of literature searched</b>	<b>Key words used in search</b>
II			
III			

Describe the results from the literature searches.

If animals were listed in Category III, explain why pain or discomfort cannot be relieved and what procedures will be used to minimize pain/discomfort.

25. What approved SOPs apply to this protocol? Please fill in the following table as appropriate.

<b>SOP Number</b>	<b>Title</b>	<b>Approval date</b>

**Rationale:**

**Background:**

**Plan of Action:**

**Specific procedure involving animals:**