For use by Committee Only

Protocol Number

Approval Date:

ANIMAL USE PROTOCOL

Adelphi University

This form has been developed by the Committee, this institution's animal care and use committee, to aid the investigator in preparing an animal use description for review and approval by the Committee. All work involving the use of vertebrate animals, including teaching and training, must be approved by the Committee before its initiation. The information in this form must be completed as it forms the basis for review and approval. This form must be accompanied by a brief narrative description as described on pages 9 -13.

LIVE (Sects. I, II, and III)

PRESERVED (Sects. I and III)

I. Application Information:

A. P.I./Instructor:

B. P.I.’s/Instructor’s Title:

C. Department: Bldg./Room No.:

D. Animals being used
   (Using the categories in Appendix 1, list the pain and distress level for each species you plan to use.)

Title:

<table>
<thead>
<tr>
<th>A. Description</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Species</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Total # of this species</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Pain/Distress Level</td>
<td></td>
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</tbody>
</table>
Experimental Design

E. Persons using animals:

F. What is the purpose of using these animals?

G. 1. How did you determine that alternate non-animals cannot be used?

2. How did you decide that the study is not an unnecessary duplicate of any other study?

H. How did you decide on the number of animals needed?

I. Application is:
   New - research
   Teaching/Training
   Non-competing renewal without significant changes
   #____________________________________________
   Non-competing renewal with changes previous
   #____________________________________________
   Competing Renewal - previous #_______________________
   Program Project/Center
   Revision - previous #________________________________
   Resubmission - previous #____________________________
   Different granting agency with identical animal use
   previous #________________________________________
   Salary award
   Fellowship

I. Granting Agency:
   J.

II. Animal Use (Live Research only)
   A. Check animal
      (Actual procedures must be described in detail in your attached "Summary of Animal Use").

      euthanasia only
      breeding : receipt of timed pregnant females and parturition on site following experimental manipulation
      non-survival surgery
      survival surgery
rabbit antibody production (see subform A)
mouse monoclonal antibody production (see subform B)
transgenic or knockout mouse production
other potentially uncomfortable or painful procedures: induced polyarthritis

B. Is special housing or caging required?
(Special Housing such as metabolic caging, solitary caging reversed light cycle
Yes    No

C. Will animals be held outside the animal facility for more than 12 hours?
(If animals are to be housed outside the central facilities for more than 12 hours, justification
must be included in your Summary of Animal Use.)

Yes    No    Location Room

D. Animal Feed
(Other, i.e., specially prepared diets, powered diet, liquid diet.)

Standard    Other(specify):

E. Will food or water be limited?
(If food or water is to be restricted as a component of the study, a justification and the
procedure and your method for monitoring the animals must be included in the Summary of
Animal Use.)

Food restriction
Yes    No    Duration

Water restriction
Yes    No    Duration

F. Will drugs or other materials be added to drinking water?
(Note any expected side effects.)

Yes
(list name(s), dose, duration)

No

G. Check if any of the following agents will be used in or on animals:
(Use of Hazardous Agents requires approval by the Safety Department.)

radioisotope    Type:

chemical agent

irradiation device
infectious agent
human material Type:

H. Will drugs, reagents, or other materials including cells be administered to animals?
Type: Please see above. Proteins and Peptides (see below)

Description of entire procedure must be included in the Summary of Animal Use, including substance, dose, route and frequency.

K. Will you be extracting any fluids (i.e., blood, urine, ascites fluid) from animals antemortem?
Yes No
(Fluid, type, amount, frequency and collection method must be described in Summary of Animal Use.)

L. How often will animals be monitored and by whom?
(Investigators are expected to monitor experimental animals at least daily, including weekends and holidays.)

K. Surgical Procedure Yes No
(If you plan to perform surgery on animals, contact the Animal Institute office for assistance in preparing this section. A separate copy of this page should be included for each species undergoing surgical procedures.)

1. Species

*Gallus gallus domesticus* (Chicken)

Survival Non-Survival

Name and brief description of procedure:
Procedure/Laboratory exercise name:

2. Location of O.R. or procedure room:
Surgeon:

5. Anesthetist: 6. Anesthesia Method:
(Give drug does, route of administration and frequency.)
None

Pre-anesthetic: None

7. Post-Operative Care
(Describe how animals are monitored and cared for post-operatively. Identify all drugs used.)

8. Person responsible for post-op care:

Phone No.:  

9. Duration of survival after surgery:

III. Personal Qualifications

A. Person supervising animal use:
(The person supervising animal use is responsible for all persons involved in the use of animals in this protocol.)

B. List all personnel handling animals, their position and qualifications/experience. (If additional training is necessary, please indicate who will be responsible for training.)

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Qualification/Experience</th>
</tr>
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</table>

Summary of Animal Care

Description of Proposed Animal Use

A) Animal Numbers, Species and Characterization, and Experimental Methods

B) Animal Experimental Methods and Euthanasia Justification:

C) Justification of Animal Use and Teaching Rationale:
D) Veterinary Care:

E) Description of Procedures for Minimizing Discomfort, Distress, Pain and Injury

F) Euthanasia Method; Considering Experimental Alternatives:

References: