The University of Scranton Institutional Animal Care and Use Committee (IACUC)

ANIMAL USE PROTOCOL Guidelineslines

The University of Scranton Institutional Animal Care and Use Committee (IACUC)

ANIMAL USE PROTOCOL INSTRUCTIONS (5/08)

Please carefully read these instructions prior to completing your protocol. Be sure to <u>follow the outline</u> <u>and address each item.</u> Submit the Cover Sheet and Protocol Narrative electronically as e-mail attachment to <u>gary.kwiecinski@scranton.edu</u> and send one signed copy of the Cover Sheet to Gary Kwiecinski, Biology Department, LSC292, at <u>least one week prior</u> to a scheduled IACUC meeting.

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

1. Name of Investigator(s) and

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?

3.6. Detailed description of procedures

3.6.1 Step by step description of all 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

Pharmaceutical grade drugs must be used. All drugs must be used prior to their expiration date – assure that you are licensed to administer pharmaceutical anesthesia by providing your DEA license number and its expiration date.

USDA animals - if procedures are used which cause more than momentary pain/distress,

The University of Scranton Institutional Animal Care and Use Committee (IACUC) ANIMAL USE PROTOCOL - COVER SHEET (2/2011)

For ORS Use	
Protocol #	
Date Approved	

				<u> </u>		_
Principal Investigator		Department		Ext:		_
					E-mail:	
Co-Investigator		De	Department		Ext:	
TITLE OF PROTOC	OI :			E-ma	il:	_
TITLE OF PROTOC	JL:					
						_
Type of Protocol:	Research	lr	nstructional			
Species			Age		Size	
No. Males	No. Females		Source/Supplier			_
	ATION OF PROJECT	-				_
*****	*****			***	******	
	ÑG [:] 5GGI F5B79G.			*****	***************************************	
IIIVEGH= SHCF	NG 3001 F3D / 90.					
I am familiar v	with those aspects of	the	2010 Guide for the Ca	re and Us	se of Laboratory Animals	
	•				al protocol and further certify	
•	•	r ind	lude unnecessary dupli	cation of	previous research or	
instructional use o		C 11				
	•		e animal facilities, and		9	
			iene Plan for the Univer to assure daily monito			
animals under this		کااالز	to assure daily mornic	n nig and	record keeping for all	
	•	arch	technicians/assistants	caring fo	r animals and/or performing	
-			complete training, and	-	· · · · · · · · · · · · · · · · · · ·	
	•				s Required for a Protocol	
Certification form	n will be filed with th	e Of	fice of Research Servic	es. No st	tudent or research	
	5 .		procedures without sup		3	
			year, I will provide the			
0 1			3		d protocols. I understand that	
	provide will be used t	to co	implete the University	of Scrant	on's annual USDA and other	
federal reports.	o IACIIC in writing	if on	imals purchased for th	is protoco	ol are transferred to another	
-	se in a different proto		imais parchasea for th	is protoct	of are transferred to another	
ootigator for de	.e a am oroni prote					
Signature of Princ	ipal Investigator		 Date			
5.g. 14 tar 5 01 1 1 1110	.ps. iiivostigatoi		Bato			
Signature of Co-In	vestigator		Date			

Send ONE PAPER COPY OF THIS SIGNED COVER SHEET to: Office of Research and Sponsored Programs, IMBM 200 <u>AND</u> submit the COVERSHEET and PROTOCOL NARRATIVE ELECTRONICALLY as an e-mail to <u>gary.kwiecinski@scranton.edu</u> and send one signed copy of the Cover Sheet to Gary Kwiecinski, Biology Department, LSC292, at <u>least one week prior</u> to a scheduled IACUC meeting.

The University of Scranton Institutional Animal Care and