

Application to Use Live Vertebrate Animals in On-Site Research Arkansas Tech University

Institutional Animal Care and Use Committee (IACUC)

Questions and completed forms should be submitted to the ATU IACUC at iacuc@atu.edu.

FOR OFFICE USE ONLY

IACUC Protocol Number:

IACUC Approval has been granted for the project described in this document

Original Approval Date:

Approval Period:

–

Start

End

TO BE COMPLETED BY APPLICANT

☐ New Application for On-Site Animal Research

☐ Three-year Renewal for On-Site Animal Research

Please provide previously assigned and approved IACUC Protocol Number

☐ Significant Change to Previously Approved Protocol

Please provide previously assigned and approved IACUC Protocol Number

Significant changes from previously approved IACUC Protocol must be approved and include:

- ☐ Changes from non-survival to survival surgery
- ☐ Changes resulting in greater pain, distress, or degree of invasiveness
- ☐ Changes in housing and/or use of animals in locations that is not part of the Animal Program overseen by the IACUC
- ☐ Changes in Species
- ☐ Changes in Study Objectives
- ☐ Changes in Principal Investigator (PI)
- ☐ Changes that impact personnel safety

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1. Title of Project:

2. Principal Investigator/Project Director: *(If not ATU Faculty, include an ATU Faculty Sponsor in question 5)*

Name: Department:
Work Phone: Email:
Cell Phone: After Hours Emergency Phone:
Work Address (if not ATU Faculty):

3. Co-Investigator/Project Director: *(List any ATU Graduate Student(s), if any. If not ATU Faculty, include an ATU Faculty Sponsor in Question 5.)*

☐ N/A

Name: Department:
Work Phone: Email:
Cell Phone: After Hours Emergency Phone:
Work Address (if not ATU Faculty):

4. Contact Person for Issues with Paperwork:

- ☐ Principal Investigator/Project Director
☐ Co-Investigator/Project Director
☐ Other *(details provided below)*

Name: Department:
Work Phone: Email:
Cell Phone: After Hours Emergency Phone:
Work Address (if not ATU Faculty):

5. ATU Faculty Sponsor: *(Required if PI/PD is not an ATU Faculty Member)*

☐ N/A

Name: Department:
Office Location: Office Phone:
Cell Phone: Email:
After Hours Emergency Phone:

6. Qualifications and Training of Research Personnel

Qualification of the PI(s): PhD
 MS
 BS
 Other *(provide details below)*

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7. Training: The PI must approve or oversee the qualifications, training, and safety of all personnel who will be handling animals associated with this research protocol. Mandatory CITI Training: All personnel on this protocol are required to complete the following courses through the CITI program (www.citiprogram.org):

- 1) Working with the IACUC, Conflicts of Interest, & Biomedical Responsible Conduct of Research
- 2) Appropriate species-specific elective course(s) depending on the research protocol.

Certificates of Training for each required module should be submitted with this application. All personnel completing field research with wild animals (wildlife and/or fish) need to also complete the "Wildlife Research" module. CITI considers fisheries research to fall under the category of "wildlife research", so there is not a separate fisheries research module.

8. Funding Sources:

Describe all funds for which you plan to apply, have pending, or have received

- ☐ Intramural Funding (e.g.: Departmental Funds, Undergraduate Research Funds, personal funds, donors/gifts)
- ☐ Extramural Funding (List Source):
- ☐ No Funding

Please List all ATU Identification Numbers of Funding Utilized					
Index	Fund	Org	Account	Amount	Description

9. Project Period

10. Site Locations

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11. Number of Animals to be used in Agriculture Research

Please estimate the number of animals of each species used in each Humane Use Category

A. Species to be Used in Research Protocol (Common Name)	B. Animals bred, conditioned, or held for Research Protocol	C. Procedures involving no pain, distress, or use of pain-relieving drugs	D. Procedures involve pain or distress, but anesthetics or tranquilizing drugs are used	E. Procedures involve pain or distress, and no anesthetic, analgesic, or tranquilizing drugs can be used *

**: Category E procedures will require further justification in Section 3.*

Define the animals (stock/strain, sex, weight/age, etc.) and explain how the relative numbers were determined justify the number of animals to be used.

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Section 2: Permits and Animal Sourcing

2.1 Are special permits required for the target taxa?

- ☐ No
- ☐ Yes *(Submit a copy of any approved permits or pending permit applications with this IACUC Application)*

Permit Information			
Permitting Agency	Permit Type	Status of Permit	Permit Dates

Please describe the sourcing of all animals to be used in this research:



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Section 3: Animal Procedures

3.1 Please provide a concise description of the proposed procedures that involve the use of animals in this research/project. Where appropriate, this section should clearly identify specific procedures intended to minimize pain such as anesthetic, analgesic, or tranquilizing drug application if utilized. Please cite the appropriate references for all methods used. *Note: An annual report of the actual number of animals collected by species must be provided to the IACUC.*

[illegible]

3.2 Surgical Procedures (Describe below)

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3.3 Non-surgical Invasive Procedures (Describe below)

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3.4 Non-surgical Non-invasive Procedures (Describe below)

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3.5 Post Research Fate of Animals: Describe the **final disposition of the animals used in the research**. If euthanasia is planned, specify the method and the individual(s) responsible for performing euthanasia techniques. Euthanasia must be consistent with the recommendations of the [American Veterinary Medical Association \(AVMA\) Guidelines for the Euthanasia of Animals](#). If not, describe the method and provide a scientific justification for the deviation.

- ☐ Return to wild/flock/herd/collection
- ☐ Food animal processing
- ☐ Food animal sale
- ☐ Euthanasia (Describe below) *Does not include unexpected event requiring euthanasia.*

Method of Euthanasia

3.6 Disposal of Remains

- ☐ Incineration
- ☐ Composting
- ☐ Rendering
- ☐ Added to Museum Collection
- ☐ Other (describe below)

3.7 If an animal becomes seriously ill or injured, specify the criteria or criterion you will use to determine if, and when, euthanasia will be used to relieve suffering.

Section 4: Safety

4.1 Past the normal rigors of working with animals, what human safety issues are peculiar to this research? Briefly describe your plans to minimize risks or reference specific standard operating procedures for the field.

4.2 Will your work involve hazardous materials, objects, equipment, or activities other than those listed above? If so, list associated specific training modules that will be completed by any personnel involved in those procedures (see module list and associated training links available through [ATU's Health and Safety Manual](#)). Alternatively, specify other required safety training.

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Section 5: Statement of Compliance

As the individual responsible (Principal Investigator/Project Director) for this research protocol:

☐ I confirm:

1. That I have completed all required training modules. *(Listed on Page 3, Number 7)*
2. That all individuals involved with animal use in this research protocol will complete the required training.
3. That all individuals involved in this research protocol will be instructed in the humane care, handling, and use of animals prior to any participation in this research protocol.
4. That I will review the required training and qualifications of all individuals involved with animal use prior to any participation in this research protocol.
5. That the wellbeing of the animals used in this study has been considered in the designing of this research protocol.

☐ I agree:

1. Not to proceed with any portion of this research protocol, including the purchase of animals, until I receive written approval from the Arkansas Tech University Institutional Animal Care and Use Committee (ATU IACUC).
2. That no substantive change(s) will be made in items contained in this proposed research protocol without prior written notification to and approval by the ATU IACUC.
3. To allow inspection of my research facilities by members of the ATU IACUC and the Animal Welfare/Attending Veterinarian and to comply promptly if informed of any violation of the Arkansas Tech University Policy on Animal Care and Use.

☐ I understand:

1. That failure to comply with the above may, ultimately, lead to revocation of my privileges to conduct animal research at Arkansas Tech University.
2. It is unlawful to begin work until the required state and/or federal permits have been issued for this research, and that the IACUC may request copies of all permits for the administrative record.