***Animal Use Protocol - Teaching***



***Ag-IACUC Use Only***

 **Date Received:** Click or tap here to enter text.

 **Category(s) of Animal Use:** [ ]  **Agricultural Teaching**

 **Approval Date:** Click or tap here to enter text. **End Date:** Click or tap here to enter text. **Protocol Number:** Click or tap here to enter text. **CITI Training Verified:** Yes [ ]  No [ ]

**Instructions:**

* This is a Microsoft Work (MSWord) “form”. Use MSWord to fill in the information asked for in either the blank(s) or box provided. You can put as much information in the blanks or boxes as needed. Please do not submit this form as a PDF.
* Submit an electronic copy (please do not send a scanned copy) in MSWord format of your completed protocol to agiacuc@uark.edu
* **Completed forms** **received by the Ag-IACUC Administrator from the email address of the PI/co-PI (Educator) are considered signed. No other form of submission is accepted.**
* Failure to follow these instructions and adequately fill out the required information may result in the protocol being returned.
* The deadline for getting this form to agiacuc@uark.edu is 12:00 midnight on the SECOND WEDNESDAY of every month.
* **Online training will be verified. If training records cannot be found for any individual listed on this form, the submission will not be considered until the training is complete.**
* **Students are required to complete the online training (see below).** Please submit a class list to the Ag-IACUC Administrator. Do not list them on this form unless they are considered a technician or teaching assistant for this course.

**Course Title:** Click or tap here to enter text.

**Requested Length (3-year maximum):** Click or tap here to enter text.

**Funding Source** (Check all that apply):

 [ ]  NIH [ ]  NSF [ ]  USDA [ ]  Private Industry [ ]  U of A [ ]  State of Arkansas [ ]  Other

**Personnel:**

 ***Instructions:***

* + In completing this personnel information, please check:
	+ The role this individual will take with respect to direct animal contact
	+ Thequalifications/experience the individual has with respect to the specie(s) listed on the proposal.
	+ ***In the event the individual has no experience with the specified role, please add a statement (Notes) identifying the intended training to be provided and the responsible individual(s).***

 ***Mandatory online training:***

* + All individuals with direct animal contact must take the following (single specific) module:
	+ **Working with the IACUC (Course for researchers, technicians, research administration/staff and students working with animals)**
	+ To access the module, go to [www.citiprogram.org](http://www.citiprogram.org). log in under “my institution, and follow the prompts.

**Principal Investigator (Department Head):** Click or tap here to enter text.

 **Contact Phone:** Click or tap here to enter text.

 **Email:** Click or tap here to enter text.

 **Department:** Click or tap here to enter text.

 **Campus Mail:** Click or tap here to enter text.

 Role: Husbandry [ ]  Euthanasia [ ]  Surgery/Procedures [ ]  Sampling [ ]  Other [ ]

 Qualifications with specie(s) listed in AUP:

 Husbandry/Handling:

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 Surgery/Procedure(s):

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 Euthanasia:

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 \*Notes: Click or tap here to enter text.

**Co-PI (Course Instructor): Click or tap here to enter text.**

 **Contact Phone:** Click or tap here to enter text.

 Designation within the study: Co-PI [ ]  Technician [ ]  Student [ ]  Other [ ]

 Role: Husbandry [ ]  Euthanasia [ ]  Surgery/Procedures [ ]  Sampling [ ]  Other [ ]

 Qualifications with specie(s) listed in AUP:

 Husbandry/Handling:

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 Surgery/Procedure(s):

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 Euthanasia:

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 \*Notes: Click or tap here to enter text.

**\*\*Name: Click or tap here to enter text.**

 Designation within the study: Co-PI [ ]  Technician [ ]  Student [ ]  Other [ ]

 Role: Husbandry [ ]  Euthanasia [ ]  Surgery/Procedures [ ]  Sampling [ ]  Other [ ]

 Qualifications with specie(s) listed in AUP:

 Husbandry/Handling:

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 Surgery/Procedure(s):

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 Euthanasia:

 Year(s): 0-1 [ ]  1-3 [ ]  3-5 [ ]  5+ [ ]  None: [ ]

 \*Notes: Click or tap here to enter text.

**\*Notes - In the event the individual has no experience with the specified role, please add a statement identifying the intended training to be provided and the responsible individual(s).\***

**\*\*To add personnel, copy and paste Name/Designation information beneath last addition\*\***

**Species utilized:**

 Common name(s): [ ]  Chicken [ ]  Turkey [ ]  Quail [ ]  Duck [ ]  Swine [ ]  Cattle [ ]  Horse [ ]  Goat [ ]  Sheep [ ]  Other Click or tap here to enter text. Gender(s): [ ]  Male [ ]  Female [ ]  Both

 Age: Click or tap here to enter text.

**References:**

* **Guide for the Care and Use of Laboratory Animals (The Guide)** <https://grants.nih.gov/grants/olaw/guide-for-the-care-and-use-of-laboratory-animals.pdf>
* **Animal Welfare Act Regulations (USDA/APHIS)** <https://www.aphis.usda.gov/animal_welfare/downloads/AC_BlueBook_AWA_508_comp_version.pdf>
* **Guide for the Care and Use of Agricultural Animals in Research and Teaching (FASS)**

<https://www.adsa.org/Portals/_default/SiteContent/docs/AgGuide3rd/Ag_Guide_3rd_ed.pdf>

* **AVMA Guidelines for Euthanasia**

<https://www.avma.org/sites/default/files/resources/euthanasia.pdf>

* **Common Industry Standards**

**Course Description** (100-300 words)**:**

 **Instructions:**

 Please provide in lay language:

* A concise, but specific description of the proposed course. This statement should stand alone and be **comprehensible to a *non-scientist.***
* Course objective.
* The species to be used.

***Course Description narrative (Comprehensible to a non-scientist!):*** Click or tap here to enter text.

**Course Design:**

 **Instructions:**

* Please attach syllabus

***Course Design narrative:*** Click or tap here to enter text.

**Calculated Number to be Utilized (by species):** Click or tap here to enter text.

**Level of Pain or Distress:** (See examples on last page) ***Check only one level****, which should be the most severe level the animals will be subjected to during the course of the study.*

 [ ]  **Level 1/Cat B-C** [ ]  **Level 2/Cat D** [ ]  **Level 3/Cat D-E** [ ]  **Level 4/Cat E**

**Housing:**

 **Instructions:**

Please describe how the animals will be housed. Include:

* Cage or pen size (include dimensions)
* Number of animals per cage (indicate floor space allotted per animal)
* A description of husbandry practices for course animals

***Housing narrative:*** Click or tap here to enter text.

**Housing - Location:**

 [ ]  Batesville Area/Room: Click or tap here to enter text.

 [ ]  Diagnostic Lab Area/Room: Click or tap here to enter text.

 [ ]  Hope Area/Room: Click or tap here to enter text.

 [ ]  Monticello Area/Room: Click or tap here to enter text.

 [ ]  North Farm Area/Room: Click or tap here to enter text.

 [ ]  Equine Pavilion Area/Room: Click or tap here to enter text.

 [ ]  Pauline Whitaker Area/Room: Click or tap here to enter text.

 [ ]  Physiology/Parasitology Farm Area/Room: Click or tap here to enter text.

 [ ]  Poultry Health Lab Area/Room: Click or tap here to enter text.

 [ ]  Poultry Research Farm Area/Room: Click or tap here to enter text.

 [ ]  Savoy

 [ ]  Applied Broiler Research Unit (ABRU)

 Area/Room: Click or tap here to enter text.

 [ ]  Cattle Area/Room: Click or tap here to enter text.

 [ ]  Swine Area/Room: Click or tap here to enter text.

 [ ]  Other Area/Room: Click or tap here to enter text.

**Non-surgical (Invasive) Procedures:**

[ ]  None

 [ ]  Blood collection

 Site: Click or tap here to enter text.

 Needle Gauge: Click or tap here to enter text.

 Frequency: Click or tap here to enter text.

 Volume: Click or tap here to enter text.

 [ ]  Other

 Describe: Click or tap here to enter text.

**Non-Surgical (Invasive) Procedures/Data collection - Locations:**

 [ ]  None

 [ ]  Batesville Area/Room: Click or tap here to enter text.

 [ ]  Diagnostic Lab Area/Room: Click or tap here to enter text.

 [ ]  Hope Area/Room: Click or tap here to enter text.

 [ ]  Monticello Area/Room: Click or tap here to enter text.

 [ ]  North Farm Area/Room: Click or tap here to enter text.

 [ ]  Equine Pavilion Area/Room: Click or tap here to enter text.

 [ ]  Pauline Whitaker Area/Room: Click or tap here to enter text.

 [ ]  Physiology/Parasitology Farm Area/Room: Click or tap here to enter text.

 [ ]  Poultry Health Lab Area/Room: Click or tap here to enter text.

 [ ]  Poultry Research Farm Area/Room: Click or tap here to enter text.

 [ ]  Savoy

 [ ]  Applied Broiler Research Unit (ABRU)

 Area/Room: Click or tap here to enter text.

 [ ]  Cattle Area/Room: Click or tap here to enter text.

 [ ]  Swine Area/Room: Click or tap here to enter text.

 [ ]  Other Area/Room: Click or tap here to enter text.

**Non-Surgical (Non-Invasive) Procedures:**

[ ]  None

 [ ]  Prolonged Restraint

 Method: Click or tap here to enter text.

 Duration: Click or tap here to enter text.

 Frequency: Click or tap here to enter text.

 Procedure by which adapted to restraint device: Click or tap here to enter text.

 [ ]  Other: Click or tap here to enter text.

**Non-Surgical (Non-Invasive) Procedures/Data collection - Locations:**

 [ ]  None

 [ ]  Batesville Area/Room: Click or tap here to enter text.

 [ ]  Diagnostic Lab Area/Room: Click or tap here to enter text.

 [ ]  Hope Area/Room: Click or tap here to enter text.

 [ ]  Monticello Area/Room: Click or tap here to enter text.

 [ ]  North Farm Area/Room: Click or tap here to enter text.

 [ ]  Equine Pavilion Area/Room: Click or tap here to enter text.

 [ ]  Pauline Whitaker Area/Room: Click or tap here to enter text.

 [ ]  Physiology/Parasitology Farm Area/Room: Click or tap here to enter text.

 [ ]  Poultry Health Lab Area/Room: Click or tap here to enter text.

 [ ]  Poultry Research Farm Area/Room: Click or tap here to enter text.

 [ ]  Savoy

 [ ]  Applied Broiler Research Unit (ABRU)

 Area/Room: Click or tap here to enter text.

 [ ]  Cattle Area/Room: Click or tap here to enter text.

 [ ]  Swine Area/Room: Click or tap here to enter text.

 [ ]  Other Area/Room: Click or tap here to enter text.

**Euthanasia** – **(Course related - does not include unexpected occurrence)**

<https://www.avma.org/sites/default/files/resources/euthanasia.pdf>

 [ ]  **Not used as part of this course**

 Post-course fate of animals:

 [ ]  Return to flock/herd

 [ ]  Processing

 [ ]  Sale

 [ ]  Other (Describe): Click or tap here to enter text.

 [ ]  Inhalation of carbon dioxide

 [ ]  Overdose of anesthetic

 Agent: Click or tap here to enter text.

 Dose: Click or tap here to enter text.

 Route: Click or tap here to enter text.

 [ ]  Physical Means without anesthesia

 Method: Click or tap here to enter text.

 [ ]  Physical Means with anesthesia

 Method: Click or tap here to enter text.

 [ ]  Other

 Method: Click or tap here to enter text.

**Euthanasia** – **(Unexpected occurrence)**

 If animal becomes ***unexpectedly*** injured or ill, please specify the criterion you will use to determine if, and when euthanasia will be used to relieve suffering

 Criteria: Click or tap here to enter text.

 Please describe method to be utilized (See above): Click or tap here to enter text.

**Disposal of Remains:**

 [ ]  Incineration

 [ ]  Composting

 [ ]  Rendering

 [ ]  Other (Describe): Click or tap here to enter text.

**Statement of Compliance:**

As the individual responsible (Course Instructor) for this research and/or teaching project/course (please check),

 [ ]  **I confirm:**

1. That I have completed the CITI training module “Working with the IACUC” for Researchers, Animal Technicians, Research Administration/staff and Students working with animals.
2. That all individuals involved with the animals used in this project will complete that above CITI training module and will be instructed in the humane care, handling, and use of animals, prior to any participation in the project, and I will have reviewed their qualifications.

 [ ]  **I agree:**

1. Not to proceed with any portion of the project or purchase animals until I received written approval from the University of Arkansas – Division of Agriculture Institutional Animal Care and Use Committee (Ag-IACUC).
2. That no substantive change(s) will be made in the items contained in this proposal without prior written notification to and approval by the Ag-IACUC.
3. To allow inspection of my research facilities by members of the Ag-IACUC and the Animal Welfare/Attending Veterinarian and to comply promptly if informed of any violations of the University of Arkansas – Division of Agriculture’s 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 the University of Arkansas – Division of Agriculture.

***Protocols received by the Ag-IACUC Administrator from the email address of the PI/co-PI (Course Instructor) are considered signed. No other form of submission is accepted.***

