

**INSTITUTIONAL ANIMAL CARE & USE COMMITTEE**

**ANIMAL SUBJECTS RESEARCH APPLICATION**

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| **ANIMAL RESEARCH APPLICATION PROCEDURES** |
| Federal regulations and University policy require prior IACUC review and approval of research involving animal subjects. Always use the most recent version of this form and the signature page, available [here](https://www.usm.edu/research-integrity/iacuc-forms.php).* All necessary [appendices](https://www.usm.edu/research-integrity/iacuc_forms/iacuc_appendices_021325.docx) must be completed and included with your submission.
* Submit this form and all required documents electronically to iacuc@usm.edu.

 Last Updated 02/13/2025 |

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| **SECTION 1: INVESTIGATOR INFORMATION** |
| Project Title: | Click or tap here to enter text. |
| Protocol Number (renewals only): | Click or tap here to enter text. |
| Principal Investigator: | Click or tap here to enter text. | USM ID Number:  | Click or tap here to enter text. |
| USM Email Address: | Click or tap here to enter text. | USM Phone Number:  | Click or tap here to enter text. |
| Department:  | Click or tap here to enter text. | Research Purpose:  | Choose an item. |
| Funding Agency (if applicable): | Click or tap here to enter text. | Grant Number:  | Click or tap here to enter text. |
| **USM-Affiliated Investigators** |
| List all affiliated investigators, graduate students, laboratory personnel, and instructional staff. All IACUC researchers must have current CITI certificates for the Animal Subjects Research Course and the Common Course.  |
| Name:  | Project Role:  | Experience/Training:  |
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| **Non-USM-Affiliated Investigators** |
| List any non-affiliated investigators involved in the project. All IACUC researchers not affiliated with USM must provide evidence of a current animal subjects research training.  |
| Name: | Project Role: | Experience Training:  |
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| **SECTION 2: RESEARCH PROCEDURES** |
| RP1. Abstract: Describe the protocol briefly in non-scientific, non-technical language. This description may be used for press releases and in response to Freedom of Information Act (FOIA) requests. |
| Click or tap here to enter text. |
| RP2. Detail the planned procedures and goal(s) in two to three paragraphs, avoiding technical language and jargon as much as possible. |
| Click or tap here to enter text. |
| RP3. Animal Disposition (check all that apply): |
|[ ]  External transfer to non-USM facility (must be processed by AR) |
|[ ]  Internal transfer to another USM protocol/AR holding colony (must be processed by AR) |
|[ ]  Released back into the wild |
|[ ]  Returned to owner/client |
|[ ]  Euthanasia (indicate drug and method below):  |
|  | Click or tap here to enter text. |
| RP4. Disposition of Animal Carcasses:  |
|[ ]  AR processed |
|[ ]  Other (explain below):  |
|  | Click or tap here to enter text. |
| RP5. Hazardous Materials Summary (check all that apply and complete any necessary appendices, as indicated in parentheses):  |
|[ ]  Non-USDA-restricted animal pathogens |
|[ ]  USDA-restricted pathogens (Appendix J) |
|[ ]  CDC select agents (Appendix J) |
|[ ]  Hazardous/toxic chemicals (Appendix L) |
|[ ]  Human pathogens (Appendix J) |
|[ ]  Mutagens/carcinogens (Appendix L) |
|[ ]  Recombinant DNA/RNA (Appendix J) |
|[ ]  Radioactive materials/isotopes (Appendix K) |
|[ ]  Transgenic animals |
|[ ]  Volatile anesthetic gasses (Appendix L) |
| RP6. Required Laboratory Biosafety Level\*: | RP7. Required Animal Biosafety Level\*: |
|[ ]  BSL I |[ ]  BSL I |
|[ ]  BSL II |[ ]  BSL II |
|[ ]  BSL III |[ ]  BSL III |
|[ ]  BSL IV (non-USM facility only) |[ ]  BSL IV (non-USM facility only) |
| \*Note: This refers to the level of biocontainment precautions available in facilities that work with a variety of biological agents (examples: Escherichia coli is covered by BSL I, BSL II includes Lyme disease and dengue fever, BSL III includes West Nile virus and eastern equine encephalitis virus, BSL IV includes smallpox and a variety of hemorrhagic diseases). Currently, no facilities at USM have BSL IV or ABSL IV coverage. Contact Martha.Sparrow@usm.edu to determine what level of BSL coverage is available at various campus facilities.  |
| RP8. Animal Procedures (check all that apply and complete any necessary appendices, as indicated in parentheses):  |
|[ ]  Blood sampling/collection |
|[ ]  Unalleviated pain/distress (USDA Category E studies) |
|[ ]  Death as an endpoint (excluding euthanasia) |
|[ ]  Trapping/capturing of wild animals (Appendix A) |
|[ ]  Euthanasia (list drug and method at RP3) |
|[ ]  Non-standard breeding colony (Appendix B) |
|[ ]  Food restriction |
|[ ]  Long-term restraint (Appendix F) |
|[ ]  Non-standard housing/caging |
|[ ]  Multiple major survival surgeries (Appendix G) |
|[ ]  Non-standard husbandry |
|[ ]  Non-survival surgery (Appendix G) |
|[ ]  Noxious stimuli |
|[ ]  Survival surgery (Appendix G) |
|[ ]  Other non-surgical procedures |
|[ ]  Anesthetic, analgesic, tranquilizer, and/or sedative (Appendix H) |
|[ ]  Special diets |
|[ ]  Paralytics (Appendix H) |
|[ ]  Water restriction  |
|[ ]  Antibody/ascites production (Appendix I)  |
| RP9. Animal Source (check all that apply and complete any necessary appendices, as indicated in parentheses):  |
|[ ]  Other approved protocol |
|[ ]  IACUC-approved breeding colony |
|[ ]  Non-standard breeding colony (Appendix B) |
|[ ]  Commercial vendor |
|[ ]  Privately owned/client (Appendix C) |
|[ ]  Private farm/ranch |
|[ ]  USDA-licensed dealer |
|[ ]  Wild caught/trapped (Appendix A) |
|[ ]  Other (explain below):  |
|  | Click or tap here to enter text. |
| RP10. Describe all non-surgical procedures/manipulations (e.g., weighing, dosing, injections). |
| Click or tap here to enter text. |
| RP11. Describe the restraint method (physical or chemical) that will be used for each of the above procedures. |
| Click or tap here to enter text. |
| RP12. Describe the restraint method (physical or chemical) that will be used for blood sample collection (where applicable).  |
| Click or tap here to enter text. |
| RP13. Describe what post-mortem procedures (necropsy, histology, etc.) will be performed. |
| Click or tap here to enter text. |

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| **SECTION 3: RESEARCH JUSTIFICATION** |
| RJ1. Briefly summarize the scientific literature and/or previous research results, testing standards, regulations, or guidelines that are the basis for this protocol. |
| Click or tap here to enter text. |
| RJ2. Provide documentation of the databases used to inform this research for each of the following topics (where applicable).  |
|  | Database | Date Consulted | Search Terms |
| Previous studies in this area:  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Non-animal-based alternative methods:  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Alternatives to painful or distressful procedures:  | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| RJ3. Describe why each species/strain/stock/breed was selected for this protocol. |
| Click or tap here to enter text. |
| RJ4. Describe how the number of animals needed was determined. |
| Click or tap here to enter text. |
| RJ5. If applicable, describe the justification for not alleviating pain/distress (required for all USDA Pain Category E procedures). |
| Click or tap here to enter text. |
| RJ6. Describe the justification for continuing procedures until death as an endpoint. |
| Click or tap here to enter text. |

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| **SECTION 4: ANIMAL SELECTION & HOUSING DETAILS** |
| AD1. Complete the following information for all requested animal species. Refer to the USDA categorization pain descriptions at the bottom of this chart if you are uncertain about any animal categorization. |
| Criteria | 1st Species | 2nd Species | 3rd Species | 4th Species |
| Common name: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Scientific name (*Genus species*): | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Strain/stock/breed: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Age: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Weight range: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Sex: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Special requirements: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number purchased/donated: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number produced in-house: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number from other protocols: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number trapped/wild caught: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number obtained by other means: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Total number: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number in USDA Category B: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number in USDA Category C: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number in USDA Category D: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Number in USDA Category E: | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| USDA Pain Category Definitions:* Category B: Animals bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. (i.e. no use)
* Category C: Procedures that cause minimal, transient, and/or no pain/distress when performed by competent persons using recognized methods. (i.e. no pain)
* Category D: Procedures that cause more than minimal/transient pain/distress where the pain/distress is alleviated by the use of anesthetics, analgesics, or tranquilizers. (i.e. alleviated pain)
* Category E: Procedures that cause more than minimal/transient pain/distress WITHOUT the use of anesthetics, analgesics, or tranquilizers to alleviate the pain/distress. (i.e. unalleviated pain) must be scientifically justified (<https://www.aphis.usda.gov/sites/default/files/ac-tech-note-categorizing-animal-pain-or-distress.pdf>).
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| AD2. Animal Facilities: Enter the IACUC-approved building and room number(s) where the animals will be housed, as applicable.  |
| Species | Housing/holding | Non-surgical procedures | Survival surgery | Non-survival surgery |
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| AD3. Name(s) of preferred animal sources (leave blank if not applicable or no preference): |
| Species | Preferred source | USDA license number | Address | Phone number |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| AD4. Select the holding protocol for housing the animals. Complete Appendix E if you have any housing requirements not covered under the standard of care in an IACUC-approved holding protocol.  |
|[ ]  IACUC-approved housing protocol |
|[ ]  Other (Appendix E) |

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| **SECTION 5: REFERENCES & SUPPLEMENTARY MATERIALS** |
| List all references used to inform this research.  |
| Click or tap here to enter text. |
| Insert copies of any approval letters from dissertation or thesis committees and/or permission letters from external organizations.  |
| Click or tap here to enter text. |
| Include any supplementary materials, such as a flow chart, experimental design table, course syllabus, and/or standard operating procedures below:  |
| Click or tap here to enter text. |

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| **SECTION 6: CHECKLIST** |
| The following documents must be submitted with your application:  |
|[ ]  [IACUC Application Signature Page](https://www.usm.edu/research-integrity/iacuc_forms/iacuc_signature_page_7122.docx)  |
|[ ]  CITI Common Course Certificate(s) |
|[ ]  CITI IACUC Certificate(s) |
| Submit the following [appendices](https://www.usm.edu/research-integrity/iacuc_forms/iacuc_appendices_021325.docx), as applicable:  |
|[ ]  Appendix A: Trapping/Capturing Wild Animals |
|[ ]  Appendix B: Non-standard Breeding Colony |
|[ ]  Appendix C: Animal Owner/Client Consent |
|[ ]  Appendix D: Aquaculture |
|[ ]  Appendix E: Non-Standard Housing |
|[ ]  Appendix F: Long-term Restraint |
|[ ]  Appendix G: Surgery |
|[ ]  Appendix H: Anesthesia/Analgesia |
|[ ]  Appendix I: Antibodies |
|[ ]  Appendix J: Biohazards |
|[ ]  Appendix K: Radiation |
|[ ]  Appendix L: Hazardous Chemicals |