

IACUC Proposal Annual Review Form

1. General Information

Annual Proposal Review for Year		Date Submitted	
Proposal Number		Pain Category	
Project Title			
Principal Investigator			
Original Date of Proposal Approval		Number of Amendments Approved in the Past Year	

2. Protocol Status

- ☐ Active - project ongoing.
- ☐ Active, but project is presently not in use.
- ☐ Inactivate as of the effective date: _____

3. Progress Report

Please provide an update on the progress made in achieving the objectives of the protocol within the last year, including any significant amendment approved changes.

4. Unanticipated Outcomes or Adverse Events

Please describe any unanticipated outcomes or adverse events, if morbidity or mortality was exhibited, describe the cause(s) if known, and how these problems were resolved. If NONE, this should be indicated.

5. Animal Use (insert rows as needed if >1 strain per species is used)

Species	Strain(s)	Total # approved	Total # Used to Date
Mouse			
Rat			
Frog			

6. Updated Search for Alternatives

☐ Not Applicable

The IACUC is responsible for ensuring that investigators have appropriately considered alternatives to animal use as well as test materials and procedures that may cause unnecessary pain and distress (USDA Pain Category D or E). Please keep the “**Three R’s of Animal Research**” (**Replacement, Refinement and Reduction**) in mind when completing this section of the form:

Provide documentation of the methods and sources used to determine that alternatives were not available or could not be used to satisfy the experimental objectives.

- ☐ List animal models to be used, potential painful and/or distressful test material administrations, experimental procedures or surgeries, for which the search for alternatives is to be performed.

A. Describe how and what search for alternatives was conducted.

☐ Information by literature search – complete the table below.

When performing your search key words to be considered should include “*in vitro*”, “*in silico*”, the animal species used, “*in vivo*”, “alternative”, “pain”, “distress”, the class of compound, relevant experimental and test procedures, as well as all any subject related key words. A separate literature search should be conducted for each animal model and class of compound to be used.

IACUC Literature Search Summary

Performed By:		Dates Covered by Search:	
----------------------	--	---------------------------------	--

Key Words Searched	Number of Hits	Comments
	Enter Site and Date of Search	

☐ Information other than literature search

Please attach supporting documentation or explain and provide documentation below:

☐ Consultation with colleagues

Please explain and provide documentation below. Provide individual's names, credentials and experience with/knowledge of the model, procedure or compound class.

☐ Training. Alternatives must be considered. Please describe below:

B. Results of the search for alternatives conducted.

Please provide a written narrative of all your search results below. Indicate if no alternatives were identified in the literature searches or other methods selected above, if consideration for the use of alternatives is limited because the specific test procedures or study design used in this study protocol are required in a living biological system (such as breeding study, etc.), or if alternatives were identified; however, they will not satisfy the experimental objectives.

☐ Information exists to allow the PI to determine that the test material, under the conditions of use on study, may or may not have the potential to cause no or no more than momentary pain or distress, **or** sufficient information does not exist to allow the PI to adequately judge the possible toxicity from test material administration under the conditions of use in this proposal. Information/data provided by previously conducted research detailed below.

☐ Based on the data supplied and/or results of the literature search, list known, anticipated or suspected adverse clinical effects below, including suspected target organ(s):

☐ Other. Please describe below:

7. PI Assurance

I hereby certify that the above information is a complete and accurate description of the animal protocol to date. I understand that failure to report significant changes in the protocol or failure to report sick animals may result in violation of Federal and State laws as well as Institutional regulations."

Signature of Principal Investigator

Date

Print Name

Signature of Attending Veterinarian or IACUC Chair

Date

Print Name