**SUNY Oswego Institutional Animal Care and Use Committee (IACUC)**

**Annual Review Form**

Principal Investigator (PI): Click or tap here to enter text.

Title of Protocol: Click or tap here to enter text.

Date of Initial Approval: Click or tap here to enter text.

Year Completed: Year 1 or Year 2: Click or tap here to enter text.

Protocol Number: Click or tap here to enter text.

1. Record of Animal Usage: (For additional rows you can right click within the table, go to insert, then insert a row above or below based on what you need).

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| --- | --- | --- |
| **Species** | **Total # Approved** | **# Used to Date** |
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1. Has the source of animals changed since the original proposal or the last annual review?

Yes  No

If yes, please explain.

Click or tap here to enter text.

1. Nature of the Protocol/Study (Check all applicable items):

|  |  |
| --- | --- |
| Survival (Chronic) Study | Inducement of a Disease State |
| Terminal (Acute) Study | Inducement of Behavioral Stress |
| Multiple Surgeries | Blood/Tissue Collection |
| Transgenic Breeding | Neuromuscular Blockers |
| Prolonged Restraint | Antibody Production |

1. (USDA) Project (Pain) Category for the animals (check all applicable items):

|  |
| --- |
| B - Breeding or Holding Colony Protocols |
| C - No more than momentary or slight pain or distress and no use of pain-relieving drugs, or no pain or distress. For example: euthanatized for tissues; just observed under normal conditions; positive reward projects; routine procedures; injections; and blood sampling |
| D - Pain or distress appropriately relieved with anesthetics, analgesics and/or tranquilizer drugs or other methods for relieving pain or distress. |
| E - Pain or distress or potential pain or distress that is not relieved with anesthetics, analgesics and/or tranquilizer drugs or other methods for relieving pain or distress |

1. Protocol Status

Requesting Protocol Continuance

**A. Active** - project ongoing.

**B. Currently inactive** - project was initiated but is presently inactive.

**C. Inactive** - project never initiated but anticipated start date is Click or tap to enter a date..

Requesting Protocol Termination

**D. Inactive** - project never initiated.

**E. Currently inactive -** project initiated but project has not/will not be completed.

**F. Completed** - no further activities with animals will be done.

**G.** **This protocol has reached its three-year maximum**. A new protocol has been filed for IACUC review on Click or tap to enter a date.

1. Please list all personnel currently associated with this project. Training must be completed when individuals are listed as personnel at the time of the renewal of an expiring study or when new personnel are added to a study that haven’t taken completed training previously. (For additional rows you can right click within the table, go to insert, then insert a row above or below based on what you need).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Title | Role | CITI - Date | Other Qualifications |
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Please list any additional personnel that have been **removed** from this project.

|  |  |
| --- | --- |
| Name | Date Removed |
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1. Please specify the source of funding for this project.

Click or tap here to enter text.

1. Progress Report

If you answered A in section V (active; project ongoing) or B in section V (project was initiated, but is presently inactive), provide a brief update on the progress made in achieving the specific aims of the protocol.

Click or tap here to enter text.

1. Problems/Adverse Events

If you answered A in section V (active; project ongoing) or B in section V (project was initiated, but is presently inactive), describe any unanticipated adverse events, morbidity or mortality, the cause(s), if known, and how these problems were resolved. If NONE, this should be indicated.

Click or tap here to enter text.

1. Alternatives to the use of animals should be considered and used when possible. Since the last IACUC approval, have alternatives to the use of animals become available that could be substituted to achieve your specific project aims?

Click or tap here to enter text.

1. Alternatives to Potentially Painful Procedures (Address the following if your project involves USDA Category D or Category E).

Procedures that cause the least amount of pain or distress to the animals should be considered and used when possible. Since the last IACUC approval, have alternatives which are potentially less painful or distressful become available that could be used to achieve your specific project aims?

Click or tap here to enter text.

1. Duplication

Activities involving animals must not unnecessarily duplicate previous experiments. Provide written assurance that the activities of this project remain in compliance with the requirement that there must be no unnecessary duplication.

Click or tap here to enter text.

1. Future Plans

No changes are planned and the project will continue as previously approved by the IACUC.

Changes are planned. Provide a full description and justification for the proposed changes. (A copy of the IACUC Protocol Amendment Form has been included for this purpose.)

[Please note that if the modifications are significant, you may be required to complete a new application. If you have questions or require assistance in making this determination, please contact the IACUC Office and/or the Attending Veterinarian.]

Other. Provide a brief explanation.

1. **CERTIFICATION OF THE PRINCIPAL INVESTIGATOR.** Signature certifies that the Principal Investigator understands the requirements of the PHS Policy on Humane Care and Use of Laboratory Animals, applicable USDA regulations and the Institution's policies governing the use of vertebrate animals for research, testing, teaching or demonstration purposes. Signature further certifies that the investigator will continue to conduct the project in full compliance with the aforementioned requirements.

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Signature of the Principal Investigator Date