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Office Use Only IACUC Number:		Date Received:
Approval Date:		Approval Period:
Principal Investigator:		
Department:	_ Campus Address:	Contact Phone:
E-mail address:		
Title of Research Project/Cours	e:	
Funding Source:		
Anticipated Duration of Project	/Course:	_ to (Not to exceed three years)
Principal Investigator		Date
Chair, Head, Director or Dean		Date
(if PI is Dept. Chair/Head/Director, th	e Associate Dean of Research or D	Dean must sign)
		research is in keeping with the standards set by y, equipment and personnel are appropriately
IACUC Chair		Date

Carefully review the application to ensure it is complete, contains sufficiently detailed responses to all questions and all attachments. <u>Incomplete applications will be returned or held until completed, without IACUC review or approval, potentially delaying the research.</u> Contact Dr. Shanna Ivey (IACUC Chair) at <a href="sivey@nmsu.edu">sivey@nmsu.edu</a> or 575-646-4650 for questions or assistance. Please allow 3 weeks for protocol review. This process may take longer if revisions are required and/or required information is missing.

Revised 10/02/2015

## I. Training Documentation

wh qua	o will have any contact with live	animals, <i>includ</i> rotocol. If the F	ling the PI, so that the	aching/research assistants, students, etc.) e IACUC can adequately assess sponsible for supervision of students or		
	Name	Position within NMSU	Years of experience with this species	Project Duties		
All Ins req sele pri	tructions for the CITI program ar uired course is under Lab Anima ect other courses present in CITI	e available thro l Research and program that po in your IACUC	ough <a href="http://compliancetitled">http://compliancetitled</a> "Investigator, Sertains to your researce protocol. An electro	I program (www.citiprogram.org).  ce.research.nmsu.edu/IACUCtraining. The Staff and Students". You are welcome to ch interests. Upon completion users may onic notification will be sent to the IACUC		
1.	Have all personnel completed th  Yes  No – Please explain why no		- '	course is required every two years)?		
2.	animal workers (offered through					
3.	another health care provider?  Yes			ed by the Campus Health Center or		
4.	To the best of your knowledge, a illnesses or other health concern Yes No – Please describe safety	s to animal wo	rkers?	oject free of disease associated with		

## **II. Principal Investigator Certification:**

By	All	ning the cover page of this protocol, I certify that: the information provided is accurate to the best of my knowledge and I will adhere to the procedures scribed;				
	All	individuals listed as personnel on this project are trained and qualified for their specific duties involving mals under this protocol;				
	All	persons listed on this protocol have read the protocol or will be provided access to the complete protocol proved by the committee before engaging in any animal use related to this project;				
	The	e activities described in this study do not <i>unnecessarily</i> duplicate previous experiments. If activities will plicate previous experiments, I have included a written explanation and justification for the duplicative ocedures.				
	<ul> <li>and I agree to:</li> <li>Obtain approval from the IACUC in advance of any changes in the project;</li> <li>Notify the attending veterinarian and/or the IACUC of any unexpected study results that impact animal welfare;</li> <li>Be familiar with and comply with all pertinent institutional, state, and federal rules and policies;</li> <li>Be responsible for the supervision and work of my staff;</li> <li>Retain copies of this protocol and all correspondence associated with it for three years beyond the completion of the animal use;</li> </ul>					
III	. Ge	neral Information				
1.	Pai	in Category Classification				
		<b>Classification B:</b> Animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery, but not yet used for such purposes. (Example: Breeding colonies of any animal species (USDA does not require listing of rats, mice, birds) that are handled in accordance with IACUC approval, the Guide and other applicable regulations. Breeding colony includes parents and offspring).				
		<b>Classification C:</b> Animals upon which teaching, research, experiments, or tests will be conducted involving no pain, distress, or use of pain-relieving drugs. ( <i>Example: Procedures performed correctly by trained personnel such as the administration of electrolytes/fluids, administration of oral medication, blood collection from a common peripheral vein per standard veterinary practice).</i>				
		Classification D: Animals upon which experiments, teaching, research, surgery, or tests will be conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs will be used. (Examples: Surgical procedures conducted by trained personnel in accordance with standard veterinary practice such as biopsies, gonadectomy, exposure of blood vessels, chronic catheter implantation, and laparotomy or laparoscopy. Administration of drugs, chemicals, toxins, or organisms that would be expected to produce pain or distress but which will be alleviated by analgesics, anesthetics, tranquilizers, or supportive care). The AWA requires that the attending veterinarian be consulted in the planning stages for projects with animals in this category.				
		<b>Classification E:</b> Animals upon which teaching, experiments, research, surgery, or tests will be conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs will adversely affect the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. ( <i>Example: Procedures producing pain or distress unrelieved by analgesics such as toxicity studies, microbial virulence testing, radiation sickness, and research on stress, shock, or pain</i> ). The AWA requires that the attending veterinarian be consulted in the planning stages for projects with animals in this category.				

2.	Project Funding		
	☐ Internally Funded: no grant or contracts associated		
	☐ Externally Funded: Provide Source:		
	Associated NMSU proposal/grant number:		
3.	3. Additional documentation. Check all that apply, provide the appropriate form:		
	☐ ÁResearch – Appendix A ☐ ÁHerd Management – Appendix B Teaching/classroom/demonstration - Appendix C		