**Animal Use Protocol Annual Review**

University of North Texas

Institutional Animal Care and Use Committee

(Please Type)

**Protocol Number:**      **Original Approval Date:**

**Department:**      **Animal laboratory areas:**

**Investigator:**      **Phone:**      **Office:**

**Project Title:**

**Today’s Date**:      **Funding Agency:**

1. Status of Project: Continuing  Completed, Please Close

2. Animals: This section must be answered for each species used in the project, copy and paste section as needed.

a. Species:

b. USDA Category: B  C  D  E

i. Total # approved for use:

ii. Total # used in last 12 months:

iii. Total # used to date:

c. Restraint procedures: Yes No If yes, answer the following:

i. Method:

ii. Duration:

iii. Frequency:

iv. Frequency of observation during restraint:

v. Personnel responsible for observation:

d. Surgical or invasive procedure: Terminal  Survival  Multiple Survival  None

e. Disposition of animals (check all that apply): Euthanized  Other (explain below)

i. Personnel performing the euthanasia:

ii. Describe euthanasia method(s). For drugs, please provide name, route, and dosage:

3. Personnel:

a. All personnel participate in the Occupational Health and Safety Program annually: Yes  No

If No, please explain:

b. All personnel have completed required CITI training within the last 5 years: Yes  No

If No, please explain:

c. All personnel have appropriate species-specific training: Yes  No

If No, please explain:

4. Project Summary:

Please provide a summary of the project to date in language that a layman could understand, avoiding jargon and specialized terminology. Have the objectives and specific aims been achieved? Is the continued experimental use of laboratory animals needed? Have you recently searched the literature to ascertain that your experimentation is not duplicative? Please limit this summary to 250 words.

Submitted by: Approved via:

Full Committee

Administrative

Signature of Investigator IACUC Chairman