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

# Annual Protocol Renewal

*Federal and University policies require annual reporting on the status of all animal protocols. This application is used for the first and second progress report of an approved animal protocol. Please complete the form below and submit with your signature to* *iacuc@findlay.edu**. This form must be received a minimum of 14 days prior to the due date (annually on date of approval). Note: The third-year renewal of an approved animal protocol requires submission of a new application for full-committee review in accordance with regulatory requirements.*

Protocol Number:

Project Title:

Expiration Date:       Date Submitted for Renewal:

Principal Investigator:

Department:       Building/Room Number:

E-mail:       Phone:

Funding Source:

1. **What is the current status of the project?** [Double click on the box to check it.]

[ ]  In Progress

 Anticipated Completion Date or Continuous:

[ ]  Project Completed as of

[ ]  Project Terminated as of

(If completed or terminated, skip to question #6.)

1. **Have you made or do you anticipate any changes in the methods or procedures used in this project/class? These may include number or species, surgical and non-surgical procedures, housing, biohazardous materials, procedures or protocols, etc. (If yes, Protocol Amendment forms must be on file or attached for approval prior to implementation of any changes.)**

[ ]  No

[ ]  Yes. Please describe:

1. **Have there been or do you anticipate any changes in personnel assigned to the project/class? (If yes, Personnel Amendment forms must be on file or submitted prior to implementation of any changes.)**

[ ]  No

[ ]  Yes. Please describe:

1. **Have any refinements been made to the study to minimize potential pain, distress and discomfort in the animals? If so, please describe.** Note that changes in pain/distress categories or substantial procedure changes require filing a Protocol Amendment Form for review by the IACUC.
2. **Has any change in experimental design or technique resulted in a change in the number of animals than originally proposed? If so, please describe.** Note that changes in pain/distress categories or substantial procedure changes require filing a Protocol Amendment Form for review by the IACUC.
3. **Briefly summarize the progress made on the study to date. (Include key developments, publications, presentations, papers in progress, etc., if applicable.)**
4. **Indicate the number of animals used in approved procedures during the last project year.**

|  |  |  |  |
| --- | --- | --- | --- |
| Species | Number of Animals | Purpose | USDA Pain/Distress Category |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(Add more lines if necessary.)

1. **Did any problem or adverse events not anticipated by your protocol affect animals on the protocol with a negative impact on health or animal welfare? If yes, please describe these events. including the cause(s) if known, and the response. Detail the preventative measure in place to prevent a similar event. If none occurred, enter “None.”**

These may include unanticipated deaths or clinical signs, pain, distress, morbidity, or anything that negatively impacts the welfare of an animal.

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

**Principal Investigator Certification – Annual Review**

**I certify the following:**

* The information provided is complete and accurate.
* I have reviewed the approved protocol and all the information is accurate and up-to-date as of submission of this annual continuation.
* An amendment will be submitted if there are any changes in the upcoming year, prior to implementation of such changes.
* This project is being conducted in accordance with all applicable laws, policies and regulations, including the Animal Welfare Act, the NIH Guide for the Care and Use of Laboratory Animals, and all UF policies and procedures regulating the humane use of vertebrate animals or animal products in instruction and research.
* The approved number of animals has not been exceeded and the use of animals has been and/or will be in accord with all applicable federal regulations and University policies.
* Any problems, adverse reaction, or unforeseen conditions encountered will be immediately reported to the IACUC for review.

Signature of PI Date

For IACUC Use:

Date of review:

Approved by:       Date: