Oct. 2023

LU Animal Teaching/Workshop Proposal

(This form shall be used for teaching, workshop, or field day activities which involve the handling of Lincoln University owned animals which does involve the collection of research data. General animal handling practices performed by University Farm Staff which are consistent with normal farm operations will NOT be required to request IACUC approval. All activities which result in the collection or compiling of research data must use the Research IACUC Approval Form.)

-Please Fill out this form in Blue to ensure your response stands out

Please Leave Blank
Proposal #:
Approval Date:
Expiration Date:
PR

Date:

A. ADMINISTRATIVE DATA

Department:

Principal instructor:

Mailing address:

Phone: E-mail:

Course

Initial submission: ☐ Renewal: ☐ Modification: ☐

Funding Source:

List the names of all individuals authorized to conduct procedures involving animals under this proposal and identify key personnel *[e.g., co-instructors(s)]*, providing their telephone, and e-mail:

1.

2.

3.

4.

B. ANIMAL REQUIREMENTS

Indicate the number of each species to be used

Cattle	Poultry
Sheep	Fish
Goats	Other:

Primary housing location(s): *[Facility manager must certify that LU has the resources capability to support the activity. If animals will be housed in lab or anywhere else outside central facility for more than 12 hours, provide building and room number.]*

Location(s) where course will be conducted:

Total number of animals to be

C. TRANSPORTATION

Transportation of animals must conform to all institutional guidelines/policies and federal regulations. If animals will be transported on public roads or out of state, describe methods you will use to comply with USDA regulations. If animals will be transported between facilities, describe the methods and containers that will be used. If animals will be transported within a facility, include the route and elevator(s) that will be used.

D. WHAT IS THE OBJECTIVE OR PURPOSE OF THIS COURSE?

E. DESCRIPTION OF ALL ANIMAL PROCEDURES AND THE SPECIES TO BE USED.

1.
2.
3.
4.

Include the following specific information, if applicable:

- **Animal identification methods** *[e.g., ear tags, tattoos, collar, cage card, implant, etc.]*.

- **Methods of restraint** *[e.g., restraint chairs, collars, vests, harnesses, slings, etc.]*. Describe how animals are restrained for routine procedures like blood withdrawals. Prolonged restraint must be justified with appropriate oversight to ensure it is minimally distressing. Describe any sedation, acclimation or training to be used.

- **Experimental injections or inoculations** *[substances, e.g., infectious agents, adjuvants, etc.; dose, sites, volume, route, and schedule]*.

- **Blood withdrawals** *[volume, frequency, withdrawal site, and methodology]*.

- **Food or fluid restriction** If food, or fluid, or both food and fluid, will be restricted, describe method for assessing the health and wellbeing of the animals. *[Amount earned during testing and amount freely given must be recorded and assessed to assure proper nutrition.]* If you are seeking a departure from the recommendations of the *Guide*, provide a scientific justification.

- **Pharmaceutical-grade and Non-pharmaceutical-grade Compounds** Identify any drugs, biologics, or reagents that will be administered to animals. If these agents are not human or veterinary pharmaceutical-grade substances, provide a scientific justification for their use and describe methods that will be used to ensure appropriate preparation and administration.

- **Other procedures** *[e.g., survival studies, tail biopsies]*.

- **Resultant effects**, if any, that the animals are expected to experience *[e.g., pain or distress, ascites production, etc.]*.

- **Other potential stressors** *[e.g., noxious stimuli, environmental stress]* **and procedures to monitor and minimize distress**. If a study is USDA Classification E, describe any non-pharmaceutical methods that will be used to minimize pain and distress.

- **Surgical procedures** *[provide details of survival and non-survival surgical procedures in Section F.]*.

F. SURGERY

If surgery is proposed, complete the following:

1. Identify and describe the surgical procedure(s) to be performed. Include preoperative procedures *[e.g., fasting, analgesic loading]*, and monitoring and supportive care during surgery. Include the aseptic methods to be used.

2. Identify the individual(s) that will perform surgery and their qualifications, training, and/or experience.

3. Identify the location where surgery will be performed. *[building(s) and room(s)]*

4. If survival surgery, describe postoperative care that will be provided and frequency of observation. Identify the responsible individual(s) and location(s) where care will be provided. *[building(s) and room(s)]* Include detection and management of postoperative complications during work hours, after hours, weekends and holidays.

5. If non-survival surgery, describe how euthanasia will be provided and how death will be determined.

6. Are paralytic agents used during surgery? If yes, please describe how ventilation will be maintained and how pain will be assessed.

H. PAIN OR DISTRESS CLASSIFICATION AND CONSIDERATION OF ALTERNATIVES

1. Pain or distress classification for USDA covered species. See Appendix 1 for classification definitions and examples.

2. Attachment 1, Explanation for USDA Classification E, must be completed for animals listed in Classification E.

3. Consideration of Alternatives

If any procedures fall into USDA's Classification D or E, causing more than momentary or slight pain or distress to the animals, describe your consideration of alternatives and your determination that alternatives are not available. Delineate the methods and sources used in the search. Database references must include databases searched, the date of the search, period covered, and the keywords used. Alternatives include methods that:

- refine existing tests by minimizing animal distress,
- reduce the number of animals necessary for an experiment, or
- replace wholeanimal use with *in vitro* or other tests.

If you use ascites production to produce antibodies, you must provide the reason for not using an *in vitro* system. Note that you must certify in Section Q.5. that no valid alternative was identified to any described procedures which may cause more than momentary pain or distress, whether relieved or not.

I. ANESTHESIA, ANALGESIA, TRANQUILIZATION, OTHER AGENTS

For animals indicated in Section H.1. Classification D, specify the anesthetics, analgesics, sedatives or tranquilizers that will be used. *[A best practice is to provide an acceptable range of the specific items to allow flexibility in the use of professional judgment and avoid non-compliance due to work conducted off protocol as a result of overly restricted parameters.]* Include the name of the agent(s), the dosage range, route(s) and schedule of administration. If information is provided in Section G.6., above, please cross-reference. Describe tracking and security of controlled drugs (Drug Enforcement Agency requirements).

J. METHOD OF EUTHANASIA OR DISPOSITION OF ANIMALS AT END OF Class/Clinic

Indicate the proposed method of euthanasia. If a chemical agent is used, specify the dosage range and route of administration. If the method of euthanasia is **not** consistent with the AVMA Guidelines for the Euthanasia of Animals, provide scientific justification as to why such method must be used. Indicate the method of carcass disposal if not described in Section N. below.

M. FIELD STUDIES

If animals in the wild will be used, describe how they will be observed, any interactions with the animals, whether the animals will be disturbed or affected, and any special procedures anticipated. Indicate if federal, state, and/or local permits are required and whether they have been obtained.

N. SPECIAL CONCERNS OR REQUIREMENTS OF THE Class/Clinic

List any special government permits, animal housing, equipment, or animal care *[e.g., special caging, water, feed, waste disposal, environmental enrichment, assurances that the animal doesn't enter the food supply chain, etc.]*.

O. INSTRUCTOR CERTIFICATIONS

1. I certify that all individuals working on this proposal, who are at risk, are participating in the institution's Occupational Health and Safety Program.
2. I certify that the individuals listed in Section A. are authorized to conduct procedures involving animals under this proposal, have attended the institutionally required investigator training course, and received training in: the biology, handling, and care of this species; aseptic surgical methods and techniques (if necessary); the concept, availability, and use of research or testing methods that limit the use of animals or minimize distress; the proper use of anesthetics, analgesics, and tranquilizers (if necessary); and procedures for reporting animal welfare concerns.
3. For all USDA Classification D and E proposals (see section H.1.): I certify that I have reviewed the pertinent scientific literature and the sources and/or databases as noted in Section H.2. and have found no valid alternative to any procedures described herein which may cause more than momentary pain or distress, whether it is relieved or not.
4. I certify that I will obtain approval from the IACUC before initiating any significant changes in this study.
5. I certify that I will notify the IACUC regarding any unexpected events that impact the animals. Any unanticipated pain or distress, morbidity or mortality will be reported to the attending veterinarian and the IACUC.
6. I certify that I am familiar with and will comply with all pertinent institutional, state, and federal rules and policies.

Principal Instructor

Name: Signature: Date:

P. CONCURRENCES

PROPOSAL NUMBER _____ (leave blank)

Facility Management certification of resource capability in the indicated facility to support the proposed study:

Facility: Name: Signature: Date:

Comments:

Q. FINAL APPROVAL

Certification of review and approval by the Institutional Animal Care and Use Committee:

Name: Signature: Date:

List any attachments here:

Appendix 1 - USDA Classifications and Examples

Classification B: Animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery, but not yet used for such purposes.
Examples:

- 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.

- Newly acquired animals that are handled in accordance with IACUC approval and applicable regulations.
- Animals held under proper captive conditions or wild animals that are being observed.

Classification C: Animals upon which teaching, research, experiments, or tests will be conducted involving no pain, distress, or use of pain-relieving drugs.

Examples:

- 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 [dog cephalic, cat jugular] or catheterization of same, standard radiography, parenteral injections of non-irritating substances.
- Manual restraint that is no longer than would be required for a simple exam; short period of chair restraint for an adapted nonhuman primate.

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.
- Blood collection by more invasive routes such as intracardiac or periorbital collection from species without a true orbital sinus *[e.g., guinea pigs]*.
- 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.

Classification E: 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.

Examples:

- Procedures producing pain or distress unrelieved by analgesics such as toxicity studies, microbial virulence testing, radiation sickness, and research on stress, shock, or pain.
- Surgical and postsurgical sequella from invasion of body cavities, orthopedic procedures, dentistry or other hard or soft tissue damage that produces unrelieved pain or distress.
- Negative conditioning via electric shocks that would cause pain in humans.
- Chairing of nonhuman primates not conditioned to the procedure for the time period used.

NOTE REGARDING CLASSIFICATION E: An explanation of the procedures producing pain or distress in these animals and the justification for not using appropriate anesthetic, analgesic or tranquilizing drugs must be provided on **Attachment 1**. This information is required to be reported to the USDA, will be available from USDA under the Freedom of Information Act (FOIA), and may be publicly available through the Internet via USDA's website.

Attachment 1 - **Explanation for USDA Classification E**

[This report is required to accompany USDA Form 7023 to support any USDA Classification E listings.]

This document must be typed.

Name of investigator:

Animal study proposal title:

Species and number of animals listed in Classification E for each year:

Species:
Number of animals:
year 1 -
year 2 -
year 3 -
Total:

Description of project including reason(s) for species selection:

Provide a scientific justification to explain why the use of anesthetics, analgesics, sedatives or tranquilizers during and/or following painful or distressing procedures is contraindicated:

Signature of investigator:

Date:

Signature of IACUC Chairperson:

Date: