

**HAMILTON COLLEGE
ANIMAL RESEARCH PROTOCOL APPROVAL FORM**

Assurance of Compliance with
*Public Health Service Policy on the Human Care
and Use of Laboratory Animals by Institutions*
(Assurance No. A3393-01)

Protocol Number: _____

Faculty Member Supervising Research: _____

Protocol Title: _____

Person Conducting Research: _____

Course number (if applicable): _____

REVIEW BY ANIMAL CARE AND USE COMMITTEE

- ____ Approved by Animal Care and Use Committee without a formal meeting of the Committee following circulation of the protocol without objections raised by any member.
- ____ Approved after Animal Care and Use Committee review
- ____ Deferred pending further information
- ____ Disapproved

Comments:

Chair, Animal Care and Use Committee

Date

A. Summary of the method of the study, including a clear statement of the experimental design and disposition of the animals after the research is completed.

B. Method of anesthesia and/or euthanasia.

Pre-anesthetic agent(s): dose: route:

Anesthetic agent(s): dose: route:

Euthanasia agent(s): dose: route:

Other:

C. Other drug administration (if any).

Drug	Dose	Route
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D. Surgical procedure(s):

F. Any other procedures that might place the welfare of the animal at risk.

VII. Discuss the consideration of alternatives for the protocol.

VIII. Declaration of Intent

This project will comply with the procedures approved by the Institutional Animal Care and Use Committee and the NIH Guide for the Care and Use of Laboratory Animals, PHS, NIH publication no. 85-23, 1985. The information provided above is accurate to the best of my knowledge. Any revision to the above animal care and use data will be promptly forwarded in writing to the chair or the Animal Care and Use Committee. Any variance from the protocol which would have an impact on animal health or comfort will be submitted to the Animal Care and Use Committee for approval.

Signature of Faculty Member Date

The following signatures indicate that the individuals involved in the research described in this protocol are familiar with the information and will comply with the procedures described. All participants must provide signatures and the faculty member must maintain those records. Additional sheets for this purpose should be added as necessary.

Signature of Individual Participating in the Project Signature of Individual Participating in the Project

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