

ORC USE ONLY

AUP #:

Date Received:

Amendment
to
Vertebrate Animal Use Protocol
for
Research, Testing, or Teaching



Instructions and Certifications (Failure to follow may result in a delay in processing)

Complete this form if **significant or non-significant changes** will be made to the research, testing, or teaching. Include the following attachments from the form entitled "Vertebrate Animal Use Protocol for Researching or Testing" (if applicable):

Surgical Procedure(s)	Attachment 1
Use of Adjuvants or Antibody Production	Attachment 2
Use of Biohazardous Materials <i>In Vivo</i>	Attachment 3
Use of Genetically-Altered Animal Subject(s)	Attachment 4

If the research, testing, or teaching is **not changing**, complete the form entitled "Continuing Review of Vertebrate Animal Use Protocol for Research, Testing, or Teaching," instead.

By signing this Amendment of Vertebrate Animal Use Protocol for Research, Testing, or Teaching (Amendment), all Principal Investigators (PIs), co-PIs, and personnel (collectively, "Researchers") or Instructor(s), as applicable, certify the following:

1. CITI Training "Animal Care and Use Course" has been completed and is current (expires after three years);
2. If the research, testing, or teaching involves a **fish species as the animal subject(s)**, additional CITI Training "Working with Fish" has been completed and is current (expires after three years);
3. Have enrolled in or opted-out of the Occupational Health and Safety Program (OHSP) (annual requirement);
4. Have completed the Risk Assessment form for this Amendment and included it as an attachment; have read and understood the risks associated with the animal use in this research, testing, or teaching as set forth in the OSHA Zoonotic Fact Sheet;
5. Have read and understood the "Responsibilities of the Principal Investigator" as set forth in TAMUCC Rule 15.99.07.C1;
6. Have read and reviewed this Amendment; any applicable supporting documentation or third-party approval has been obtained from the appropriate authority and has been included as an attachment to this Amendment (e.g., EHS field safety plan, permit, grant, institutional approval, third party permission, etc); have signed the Amendment electronically;
7. Research, testing, or teaching has **stopped** until the Amendment is approved; and
8. Will submit a Completion Report at the conclusion of the research, testing, or teaching under this Amendment.

After completing the foregoing, submit the Amendment with supporting documentation via email to:

IACUC@tamucc.edu

Animal Use Protocol (AUP) Overview

AUP #:

Approval Date:

Title:

Principal Investigator or Instructor

Name:

Address:

Phone Number:

Email Address:

College:

Department:

Faculty Staff Graduate Student Undergraduate Student Other

Specify Other:

Co-Principal Investigator or Instructor

Name:

Address:

Phone Number:

Email Address:

College:

Department:

Faculty Staff Graduate Student Undergraduate Student Other

Specify Other:

Co-Principal Investigator or Instructor

Name:

Address:

Phone Number:

Email Address:

College:

Department:

Faculty Staff Graduate Student Undergraduate Student Other

Specify Other:

Co-Principal Investigator or Instructor

Name:

Address:

Phone Number:

Email Address:

College:

Department:

Faculty Staff Graduate Student Undergraduate Student Other

Specify Other:

Amendment(s)

Indicate all applicable changes.

Personnel (complete the attached "Amendment of Personnel or Designee")

Names:

Additional Animal Subject(s)

Provide justification for numbers and planned procedure(s):

Additional Species

Provide justification, numbers justification, and planned procedure(s):

Housing

Provide justification, new holding conditions, building and room number:

Surgical Procedure(s) (complete Attachment 1 of the AUP)

Provide justification and description, including postoperative care:

Addition or Deletion of Procedure(s)

Provide justification and description:

Anesthesia or Analgesia

Provide justification and description:

Method of Euthanasia

Provide justification and description:

Period of Performance

Provide justification and description:

Funding Source

Provide new source, Maestro #:

Title

Provide new title:

Final Disposition of Animal Subject(s)

Provide justification and description of new disposition:

Other

Provide justification and description:

Description of Amendment(s)

Provide a detailed description of the proposed amendment(s) with justification.

(For personnel, provide training or experience).

Pain and Distress

Indicate whether the proposed amendment(s) may reasonably be expected to cause **more than** slight or momentary pain or distress to animal subject(s).

- No.
- Yes, but any potential pain or distress will be relieved through use of anesthetics and analgesics, and alternatives are not available.
- Yes, but anesthetics and analgesics are inappropriate for these procedures, and alternatives are not available.

If "yes" to either, describe the methods and/or sources used to determine the inappropriateness of alternatives to these **procedures** are not available. Include date range of the search.

(e.g., Medline).

Researcher or Instructor Signatures

By signing this Amendment, the Researcher(s) or Instructor(s), as applicable, certifies that he/she has read and understood the requirements and responsibilities set forth in the section entitled "Instructions and Certifications" in relation to the research, testing, or teaching. In addition, the Researcher(s) or Instructor(s) certifies that he/she will abide by any and all applicable federal, state, and or/institutional regulations, including any requirements from the Institutional Animal Care and Use Committee (IACUC) and/or the Office of Research Compliance (ORC).

Principal Investigator or Instructor

Name:

Date:

Signature:

Co-Principal Investigator or Instructor

Name:

Signature:

Date:

Co-Principal Investigator or Instructor

Name:

Signature:

Date:

Co-Principal Investigator or Instructor

Name:

Signature:

Date:

Amendment of Personnel or Designee

Complete this form to:

(1) revise Personnel listed on the AUP; and/or

(2) provide for no more than two (2) designees, who may act on the Principal Investigator's or Instructor's behalf; the Principal Investigator or Instructor remains primarily responsible for oversight of the research, testing, or teaching.

Designee name(s), if applicable:

By signing this Amendment of Personnel, the Researcher(s) or Instructor(s), as applicable, certifies that he/she has read and understood the requirements and responsibilities set forth in the section entitled "Instructions and Certifications" in relation to the research, testing, or teaching. In addition, the Researcher(s) or Instructor(s) certifies that he/she will abide by any and all applicable federal, state, and or/institutional regulations, including any requirements from the Institutional Animal Care and Use Committee (IACUC) and/or the Office of Research Compliance (ORC).

Principal Investigator or Instructor

Name:

Date:

Signature:

Co-Principal Investigator or Instructor or Designee

Name:

Date:

Signature:

Co-Principal Investigator or Instructor or Designee

Name:

Signature:

Date:

Co-Principal Investigator or Instructor or Designee

Name:

Signature:

Date: