logo-blackAnimal Care and Use Committee For Administration Use Only

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| Protocol No. | Date Received: | Committee Meeting Date: |

**POST-APPROVAL MONITORING**

**Self-Reporting Form**

As part of post-approval monitoring process of the Animal Care and Use Committee, this form is for use by protocol authors to self-report on activities of a current and approved Animal Use Protocol. Activities reported can be specific procedures, handling methods, experimental manipulations, etc. Refer to Sop G-05 *Post Approval Monitoring* for more information

Please submit a **signed electronic version** of this form to [acuc@unbc.ca](mailto:acuc@unbc.ca).

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| **POST APPROVAL MONITORING – SELF REPORTING** | | | |
| Date: | | | Protocol Number: |
| Protocol Title: | | | |
| PI: | | | Personnel Observed: |
| PI Signature: | | | |
| Procedure(s) observed: | | | |
| Unexpected events or trends during routine monitoring activities? | Yes  No | Comments: | |
| Adverse animal events or unexpected outcomes? | Yes  No | Comments: | |
| Unexpected deaths? | Yes  No | How many in a 7-day period? | |
| Please Describe: | |
| Comments: | |
| Unexpected Euthanasia? (preformed by the research team) | Yes  No | How many in a 7-day period? | |
| Please Describe: | |
| Comments: | |
| Staff compliant with the protocol? | Yes  No | Comments: | |
| Additional training provided that is NOT outline in the protocol? | Yes  No | Comments: | |
| General comments regarding animal welfare. Please include all relevant details. (i.e., General welfare was “good” as minimal signs of stress were noted during handling, examples provided) | | Comments: | |
| Photographs  *If possible, please include photographs of animal restraint, procedures being conducted, medications / treatment being administered, or any other procedure-related activities. Please describe what the photograph(s) is(are) illustrating.* | | | |
| **FOR OFFICE USE ONLY**  ACUC comments:  Follow up:  Yes  By whom:  Date due to the ACUC:  No | | | |