**Animal Use Protocol Amendment**

**Middle Tennessee State University**

**Amendment**

**Please type all entries.** Use this form to request significant changes in animal care and use made to your currently approved protocol. Complete *all fields* in Section I and any applicable questions in Section II.

Submit the *completed* amendment to the Office of Compliance via compliance@mtsu.edu.

**Section I: Protocol Information**

 **Protocol #**

 **Title:**

 **Principal Investigator:**

 **Phone:**

 **Email:**

 **Co-Investigator:**

 **Phone:**

 **Email:**

 **Funding Source:**

**Section II: Request Changes**

 **Type of amendment:** Please check all that apply and complete the corresponding sections below:

|  |  |
| --- | --- |
| [ ]  | Strain—Only if the phenotype could potentially affect the welfare of the animal |
| [ ]  | Species addition and/or removal |
| [ ]  | Increase in animal numbers |
| [ ]  | Animal use procedures (i.e., surgery, euthanasia, blood collection, special diets, etc.) |
| [ ]  | Use of additional potentially hazardous substances: biologics, radioisotopes, chemicals, drugs, infectious agents, recombinant DNA (including use or generation of transgenics) |
| [ ]  | Principal Investigator |
| [ ]  | Other |

**1. Strain:** Describe the phenotype and list any conditions that are not normal in healthy animals. Describe the course of action that will be taken to relieve pain/distress.

 **A.** How will the animals be monitored and by whom?

**2. Species:** Please describe what species you would like to add to this protocol and provide scientific justification as to why this species is required.

**3. Increase in animal numbers from the total numbers approved in the original submission.** Please complete Parts 3A and 3B. Only describe the numbers needed beyond those that were approved in the original submission.

 **A. Animal Number Chart**

|  |  |  |  |
| --- | --- | --- | --- |
| Species | Number Procured | Number Transferred (include protocol #) | Number Produced |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

**B. Animal Number Justification.** Please justify why you need to use more animals than you were originally approved for. Also describe how these animals will be used on this protocol.

**4. Animal Use Procedures.** Please complete 4A, 4B, and 4C as applicable.

**A. Description of procedures.** Describe the proposed procedure(s) or change in procedures to be performed in addition to those already approved on this protocol. Describe how this related to the original goal of the approved protocol.

* If you need to refer to approved procedures in your description, please explain clearly which is (are) the proposed procedures.

**B. Qualifications.** Indicate the personnel that have the relevant qualifications for the specific procedures proposed in this amendment.

**C. Literature Search.** For new proposed procedures that have the potential to cause pain/distress, a literature search is required.

 **A.** Was a literature search conducted? [ ]  Yes [ ]  No

**5.** **Use of Additional Potentially Hazardous Substance(s).** Describe and justify any proposed changes in the use, or the addition of potentially hazardous substances.

**6. Principal Investigator.** Please explain the reason for changing the PI.

**7. Other.** Please describe and justify any additional changes you would like to make to this protocol.

**For Compliance Office Use Only**

**Review.**

Type of review: [ ]  DMR [ ]  Full

**Decision.**

Decision made: [ ]  Approved [ ]  Approve Pending Clarification [ ]  Refer to Full Committee

[ ]  Not Approved

Explanation: