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| Howard University | | For Committee Use Only (Revised 03/2010) | | |
| Addendum to Proposal for Laboratory Vertebrate Use In Research, Teaching or Testing Form IACUC C | | Date Received: | | |
| | | Child IACUC No. | | |
| <p>See Instructions for completing Form C at http://www.huiacuc.howard.edu. Note: Incomplete, hand-written or unsigned forms will be returned. For assistance in completing this form call the IACUC Office at 202 806 5340 or email huiacuc@howard.edu. The IACUC Fax No. is 202 483 8042. The IACUC Office Campus Address is Wing 5, Suite 137, C.B. Powell.</p> <p>I certify that this form is completed truthfully, that I and all persons who handle animals on this project are or will be appropriately trained, that the IACUC will be notified before any changes are made in animal use or care, that this study will be conducted humanely in accordance with University and applicable federal regulations, and that a reasonable good-faith effort was made to assure that the proposal activities do not unnecessarily duplicate previous experiments. Applicable IACUC guidelines will be followed.</p> | | IACUC Action | | Date |
| | | FCR | <input type="checkbox"/> | |
| | | Approval Date After FCR | | |
| | | AdDelRv | <input type="checkbox"/> | |
| | | AdDelRv AutoDate | | |
| | | SciMeritRev | <input type="checkbox"/> | |
| | | Safety Committee Action | | Date |
| | | RSC | <input type="checkbox"/> | Date |
| | | IBC | <input type="checkbox"/> | Date |
| | | Final Approval Date | | |

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|--|------------|-------------------------------|--|-----------------------------|--|-----|-------|
| Protocol No. | | Expiration | | Funding Source | | | |
| Proposal Title | | | | | | | |
| Principle Investigator Information | | | | | | | |
| Prefix | First Name | Middle Init | Last Name | Dept | Phone | Fax | Email |
| Dr. | | | | | | | |
| Identify species (using drop-down menu) and indicate (√) if animal is a USDA-covered species (USDACS) or Endangered (ENDG) | | | | | | | |
| Species\Strain | | USDA Covered Species (yes/no) | yes <input type="checkbox"/> no <input type="checkbox"/> | Endangered Species (yes/no) | yes <input type="checkbox"/> no <input type="checkbox"/> | | |

| List name(s) of all animal handlers(s) added to or deleted from this project below: | | | | |
|--|------|--|--------------------------|---|
| Staffing Change | Name | Completed LATA Online Training and Certification | | Years of Experience With Relevant Species |
| | | Yes | No | |
| Added | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Added | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Added | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Added | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Added | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Deleted | | | | |
| Deleted | | | | |
| Deleted | | | | |
| Deleted | | | | |
| Deleted | | | | |

Additional Animals Requested: Complete this section only if additional animals are requested. Otherwise skip this section. **Complete a separate addendum for each species for which additional animals are requested.**

1. Enter total number of animals approved for your project each year. Enter 0 for shorter project periods. In last column enter total for all years. 2. Enter additional animals requested under the appropriate year. In last column enter total for all years. 3. Add the total for 1 and 2. In last column enter total for all years. 4. Enter number of animals used to date. In last column enter total for all years. 5. Subtract 4 from 3. In last column enter total for all years. For 6 and 7 enter average number of animals housed simultaneously. For 8. and 9 enter average housing days per animal.

| I. Total Animals Per Year and Total Animals for All Years for Species Listed Above | | | | | | | II. Average No. of Animals Housed Simultaneously | | III. Average Housing Days Per Animal | |
|--|--------|--------|--------|--------|--------|------------------------|--|--------|--------------------------------------|--------|
| Total Animals Per Year [See instructions above (*).] | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Total for Years 1 to 5 | 6. Current | 7. New | 8. Current | 9. New |
| 1. Current \No. Approved | | | | | | | | | | |
| 2. Additional No. to be added | | | | | | | | | | |
| 3. New Total (Add 1 + 2) | | | | | | | | | | |
| 4. No. Used To Date | | | | | | | | | | |
| 5. No. Remaining for Use (Subtract 4 minus 3) | | | | | | | | | | |
| Use this section to provide justification for additional animals. Provide statistical analysis justification if the increase is greater than 5% of the number currently approved for use | | | | | | | | | | |

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| Other or Additional Proposal Changes: Describe Change(s) to the Approved Protocol |
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| Principal Investigator (Print or Type Name) | Principal Investigator Signature | Date |
|---|----------------------------------|------|
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Supplemental Information: