



THOMPSON RIVERS UNIVERSITY

Animal Use Protocol (AUP) application

Project Info.

Project Title:

Principal Investigator:

Start Date:

End Date:

Project Team Info.

Co-Investigator(s):

Common Questions

1. Applicant Declaration

#	Question	Answer
1.1	I take responsibility for ensuring that all animals used in this project will be cared for in accordance with the principles set forth by the Canadian Council on Animal Care (CCAC).	
1.2	Is this a collaboration with another institution? This could include another post-secondary institution, a government institution ... please name/list all other institutions. Please enter N/A or no if not.	
1.3	Is this study under review by another or other animal care committees (ACCs) at other	

	institutions? Please name/list the other ACCs. Please enter N/A or no if not.	
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2. Objectives, Impacts, and Justification

#	Question	Answer
2.2	Objectives and Benefits: In layman's terms, summarize the primary objective(s) and benefits expected from the project. For teaching protocols, please indicate the pedagogical merit of the proposed use of animals.	
2.3	Impacts: Do you anticipate this project will have a significant impact on populations of any of the study animals? If yes, please explain.	
2.4	Impacts: For each case where significant impacts are anticipated, please specify and describe measures to minimize impacts.	
2.5	Justification - Replacement: have alternatives to animal use been explored? Are there non-animal alternatives (eg. computer simulation, cell/tissue cultures, etc.) and if so, why have these been rejected? Please explain.	
2.6	Justification - Reduction: justify the proposed number of animals based on sound experimental design. Could you use fewer animals to meet the objectives and/or learning outcomes? Please explain.	
2.7	Justification - Refinement: could refinement of research design and/or techniques lower animal pain or distress or increase animal well-being? Please explain.	
2.8	Pedagogical Merit/Scientific Merit If the purpose of this protocol is teaching, then please confirm that the course has undergone pedagogical merit review. If the purpose of this protocol is research, then please confirm that the research has undergone scientific merit review.	

	Please state the source of this merit review and the outcome of the review.	
2.10	Please indicate the animal to student ratio and the student to instructor ratio	

3. Procedures, Manipulations and Techniques

#	Question	Answer
3.1	Will this project involve a field study? If yes, please complete Appendix 2.	
3.2	Will this project involve the use of drugs or a surgical procedure? If yes, please complete Appendix 1.	
3.3	Will this project involve the use of hazardous agents? If yes, please complete Appendix 3.	
3.4	Please describe the fate of the animals after the study has been completed.	
3.5	Please confirm that each member of the project team has completed a CCAC recognized course in animal research ethics or, if they have not, provide animal care training/experience.	
	If you are supervising personnel who are new at working with animals, how do you assess their competency to perform the procedures that they will be conducting in this protocol? In other words, how do you know they have the necessary practical skills to conduct the procedure on a live animal?	
3.6	Please describe the frequency and description of individual animal use (e.g. number of times per lab, per week, per month (a flow chart may be helpful to depict this information)	
3.7	Please describe (A) the limits to the number of procedures performed on each animal - (B) the interval (reset period) between the use of each animal and (C) the limits to the number of times an animal is used before it is 'retired'	
3.8	Has the proposal for this project been through a peer review process? If not, please	

	describe the source(s) of funding and any oversight that might have taken place.	
3.9	Are any permits required from any provincial, national, international, or other agency for the proposed activities? If YES, please indicate the nature of permission required, date obtained (or pending), duration and any other pertinent information. Please provide a copy of the permit to the ACC (through the Attachments tab) with this application, or when obtained.	
3.10	Will this project be carried out at a partner institution or animal facility? A private farm/facility? If so, please describe in detail including any permits or certifications the facility may hold.	
3.11	The CCAC requires that Animal Welfare Assessments (AWA) are to be performed by the PI and research team throughout the use of their study. Please note that if any welfare status is deemed concerning or severe throughout the study or there are any adverse welfare events these MUST be immediately reported to the ACC. Please answer these questions listed in 3.11-3.14 pertaining to the animal welfare assessment plan (For further information please see the CCAC Guidelines Animal Welfare Assessment 2021): Please provide a summary overview of the animal welfare assessment plan (An attachment can be provided in Romeo to help clarify the summary if required)	
3.12	What are the AWA tools that are being used to evaluate and ensure physiological, environmental AND behavioral indicators of welfare are being met. Examples include drone or camera monitoring, visual monitoring after/during handling, does the animal return to normal behavior(s) after handling If so, what are the normal behaviors that the research team is looking for? Are animals allowed to exhibit normal positive motivated behaviors? What are the environmental enrichment activities or toys	

	being provided in a facility the animals are being housed in?	
3.13	Who are the individuals performing the animal welfare assessments (ideally more than one individual)?	
3.14	AWA Record keeping: How is the team monitoring or charting acceptable, mild, concerning or unacceptable welfare concerns?	

4. End Points and Euthanasia

#	Question	Answer
4.1	Endpoints - Please provide a description of appropriate physical, physiological, and/or behavioural indicators that will tell you at what point the use of an individual animal should be discontinued. Indicate how often the animals will be monitored for these signs and what will be done with the animals when the endpoint has been reached.	
4.2	Methods of Euthanasia - In cases where euthanasia is required, describe the procedure that will be used. If methods deviate from those described by CCAC, please provide justification.	
4.3	Disposal - if euthanasia is necessary, please indicate how the animals will be disposed of.	
4.4	Disposal - if not euthanized after the study, what will happen to the animals?	
4.5	Disposal - if other please specify	
4.6	Please provide location of animal(s) before experimentation (building and room number).	
4.7	Please provide location of animal(s) during experimentation (building and room number).	
4.8	Please provide location of animal(s) after experimentation (building and room number).	

5. Appendix 1 : Surgical Procedures

#	Question	Answer
5.1	Does your study involve the use of surgical procedures? If yes, please complete the following appendix.	
5.2	Check all that apply.	
5.3	What type of surgical procedure(s) will be used?	
5.4	Please describe the duration of each procedure that will be used.	
5.5	Drugs Used : Will anaesthesia/analgesia be used? If no, please explain/provide justification.	
5.6	Drugs Used : Please describe any pre-anaesthetic drug(s) that will be used. Include drug, dosage, and route of administration.	
5.7	Drugs Used : Please describe any anaesthetic drug(s) that will be used. Include drug, dosage, and route of administration.	
5.8	Drugs Used : Please describe any analgesic drug(s) that will be used. Include drug, dosage, and route of administration.	
5.9	Please provide the name(s), contact information and qualifications of each person performing surgery.	
5.10	Please provide the name(s), contact information and qualifications of each person responsible for post-operative care.	
5.11	Please provide location of animal(s) before surgery (building and room number).	
5.12	Please provide location of animal(s) during surgery (building and room number).	
5.13	Please provide location of animal(s) after surgery (building and room number).	

6. Appendix 2 : Field Studies

#	Question	Answer
6.1	Does your project involve field studies? If yes, please complete the following appendix.	
6.2	Sites - Please name all field sites where animals will be collected or studied.	
6.3	Sites - Please name all lab sites where animals will be studied.	
6.4	Please indicate whether the project may have significant negative impacts on the populations being studied or their environment and outline measures to be taken to minimize these impacts.	
6.5	Please describe safety precautions that will be undertaken to minimize injury/mortality to animals and personnel.	

7. Appendix 3 : Hazardous Agents

#	Question	Answer
7.1	Does your study involve the use of hazardous agents? If yes, please complete the following appendix.	
7.2	Will this study use hazardous chemicals? Please specify agents and attach proof (under attachments tab) of safety approval from department chair.	
7.3	Will this study involve biohazards? Please specify agents and attach proof (under attachments tab) of safety approval from department chair.	
7.4	Will this study involve carcinogenic material? Please specify agents and attach proof (under attachments tab) of safety approval from department chair.	
7.5	Will this study involve radioactive material? Please specify agents and attach proof (under attachments tab) of safety approval from department chair.	
7.6	Will this study involve the use of controlled substances? Please specify agents and attach	

	proof (under attachments tab) of safety approval from department chair.	
7.7	Please provide a brief description of the potential health risks (to animals and humans) posed by each hazardous agent used.	
7.8	Please provide the building and room numbers where each agent will be used.	
7.9	Outline the precautions that will be taken in the handling of the hazardous materials. Include: storage of agents, personal protective equipment required, containment requirements, signage, waste and animal disposal, and emergency procedures.	
7.10	Please describe any special animal care that may be required due to the use of hazardous materials.	
7.11	Please provide the name, contact information and qualifications of the individual responsible for special animal care.	

Additional Attachments

Doc / Agreement	Version Date	File Name	Description