Form B (per rule 8(a)* for Submission of Research Protocol

(s)Application for Permission for Animal Experiments

Application to be submitted to the CPCSEA, New Delhi after approval of Institutional Animal Ethics Committee (IAEC)

Section -I

1.	Name and address of establishment	
2.	Registration number and date of registration	
3.	Name, address and registration number of breeder from which animals acquired (or to be acquired) for experiments mentioned in parts B & C	
4.	Place where the animals arepresently kept (or proposed to be kept).	
5.	Place where the experiment is to be Performed (Please provide CPCSEA Reg. Number)	
6.	Date and Duration of experiment.	
7.	Type of research involved (Basic Research/Educational/Regulatory/ ContractResearch)	

Signature

Name and Designation of Investigator

Date:

Place:

Section -II

Protocol form for research proposals to be submitted to the Institutional Animal Ethics Committee /CPCSEA, for new experiments or extensions of on going experiments using animals.

- 1 . Project/Dissertation/Thesis Title:
- 2 . Principal Investigator/Research Guide/Advisor:
 - a. Name
 - b. Designation
 - c. Dept/Div/Lab
 - d. Telephone No.
 - e. E-mailId
 - f. Experience in Lab animal experimentation
- 3. List of all individuals authorized to conduct procedures under this proposal.
 - a. Name
 - b. Designation
 - c. Department
 - d. TelephoneNo.
 - e. E-mailId
 - f. ExperienceinLabanimalexperimentation
- 4. Funding Source/Proposed Funding Source with complete address (Please attach the proof)
- 5. Duration of the animal experiment.
 - a. Date of initiation (Proposed)
 - b. Date of completion (Proposed)
- 6.Describe details of study plan to justify the use of animals (EncloseAnnexure)

7. Animals required

- a. Speciesand Strain
- b. Age and Weight
- c. Gender
- d. Number to beused (Year-wise breakups and total figures needed to be given in tabular form)
- e. Number of days each animal will be housed.
- 8.Rationale for animal usage
 - a. Why is animal usage necessary forthese studies?
 - b. Whether similar study has been conducted on *invitro* models? If yes, describe the leading points to justify there quiremen to fanimal experiment.
 - c. Why are the particular species selected?
 - d. Why is the estimated number of animals essential?
 - e. Are similar experiments conducted in the past in your establishment?
 - f. If yes, justify why new experiment is required?
 - g. Have similar experiments been conducted by any other organization in same or other *invivo* models? If yes, enclose there ference.
- 9.Describe the procedures in detail:
 - a. Describe all in vasive and potentially stressful non-invasive procedures that animals will be subjected to in the course of the experiments)
 - b. Furnish details of injections schedule Substances:

Doses:

Sites:

Volumes:

c.Blood withdrawal Details:

Volumes:

Sites:

d.Radiation (dosageandschedules):

- 10. Does the protocol prohibit use of anesthetic or analgesic for the conduct of painful procedures? If yes, justify.
- 11. Will survival surgery be done?
 - If yes, the following to be described.
 - a. List and describe all surgical procedures (including methods of asepsis)

- b. Names, qualifications and experience levels of personnels involved.
- c. Describe post-operative care
- d. Justify if major survival surgery is to be performed more than once on a single animal.

12.Describe post-experimentation procedures.

- a. Scope for Reuse:
- b. Rehabilitation (Name and Address, where the animals are proposed to be rehabilitated):
- c. Describe method of Euthanasia.:
- d. Method of carcass disposal after euthanasia.:

13. Describe animal transportation method sifextra-institutional transport is envisaged.

14. Use of hazardous agents (use of recombinant DNA-based agents or potential human pathogens requires documented approval of the Institutional Biosafety Committee (IBC). For each category, the agents and the biosafety level required, appropriate etherapeutic measures and the mode of disposal of contaminated food, animal wastes and carcasses must be identified).

If, your project involved use of any of the below mentioned agent, attach copy of the approval certificates of the respective agencies:

- (a) Radionucleotides (AERB)
- (b) Microorganisms/Biological infectious Agents (IBSC)
- (c) Recombinant DNA (RCGM)
- (d) Any other Hazardous Chemical/Drugs

Investigators declaration.

- 1. I certify that theres earch proposal submitted is not unnecessarily duplicative of previously reported research.
- 2. I certify that, I am qualified and have experience in the Experimentation on animals.
- 3. For procedures listed under item 10, I certify that I have reviewed the pertinent cientific literature and have found no valid alternative to any procedure describbed herein which may cause less pain ordistress.
- 4. I will obtain approval from the IAEC/CPCSEA before initiating Any changes in this study.
- 5. I certify that performance of experiment will be initiated only upon review and approval of scientific intent by appropriate expert body (Institutional Scientific Advisory Committee/funding agency/other body).
- 6. I certify that I will submit appropriate certification of review and Concurrence for studies mentioned in point14.
- 7. Is hall maintainall the records as performat (FormD) and submit to Institutional Animal Ethics Committee (IAEC).
- 8. I certify that, I will not initiate the study before approval from IAEC/CPCSEA received in writing. Further, I certify that I will follow there commendations of IAEC/CPCSEA.
- 9. I certify that I will ensure the rehabilitation policies are adopted (wherever required).

Signature

Name of Investigator

Date:

Certificate

Thisistocertifythattheprojectentitled.....

. has been approved by the IAEC

havingIAECapprovalNo..

AuthorizedbyNameSignatureDate

Chairman: ...

MemberSecretary: ...

MainNomineeof ...

CPCSEA:

(Kindlymakesurethatminutesofthemeetingdulysignedbyalltheparticipantsaremai ntainedbyOffice)

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FORM C

(To be filled on the daily basis)

Record of Animals bred / acquired: (to be maintained by the Breeder/Establishment)

Date	No. of	No. of	Name,	No. of	Name,	Signature
	Animals	Animals	Address	animals	address and	
	(Specify	acquired	and date	supplied	registration	
	species,	(Specify	& from	(specify	No. of the	
	sex and	date of	whom	date,	Establishment	
	age)	acquisition	acquired	species, sex	to whom	
	_	species,		and	transferred	
		sex and		voucher/bill		
		age)		no.)		

FORM D

Record of Animals Acquired and Experiments performed: (to be maintained by the Investigator)

Date	No. of	Name,	Date and	Duration of	Name and	Signature of
	animals	Address and	IAEC	experiment	address of	the
	acquired	Registration	approval		the person	Investigator
	(specify	No. of the	number		authorized	certifying
	Species,	Breeder			to conduct	that all
	Sex and	from whom			the	conditions
	Age)	acquired			experiment	specified for
		with				such an
		Voucher/				experiment
		Bill No.				have been
						complied.