

**NATIONAL UNIVERSITY OF MEDICAL SCIENCES**

**INSTITUTIONAL REVIEW APPLICATION FORM**

**ANIMAL STUDY**

1. Title of project:

2. Name and designation of Principal Investigator:

Telephone/fax/ email:

Department address:

Research field/subject of specialty:

3. Description of relationship of Principal Investigator with the institution (e.g. employee, collaborative research etc.):

4. Proposed date of procedure commencement:

5. Proposed date of procedure completion:

6. Is the project being supported by an external organization? Yes  No

7. If yes, state the name of the organization and date of application:

8. If a funding application is not successful, will the project still go ahead? Yes  No

9. Please indicate whether this application is for:

9.1 A new project? Yes  No

9.2 A project which has (previously or simultaneously) been submitted to this or another ethics committee? Yes  No

If yes, provide reasons for re-submission or simultaneous submission and the name of the ethic committee \_\_\_\_\_

9.3 A significantly revised current protocol? Yes  No

If yes, quote the approval number and species and number of animals used to date

10 Will adequate precautions be taken in accordance with statutory requirements and have relevant personnel been informed? Yes  No

10.1 Has the appropriate authority or license been obtained? Yes  No

11 Does the project involve native, imported or protected species? Yes  No

11.1 Have the relevant licenses been obtained from the NUMS authorities? Yes  No

Application Permit number: \_\_\_\_\_

12 Please identify all the locations at which research using animals will be conducted. Full street addresses should be supplied where applicable.

Your answer is crucial for the assessment of scientific merit and the necessity of animal use in the experiment. Use lay terms that will be understood by a person without a scientific background. (Provide the separate sheets for answers, if needed)

13 Describe the aims of the project in lay terms.

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13.1 Comment on the significance of the research that you believe justifies the use of animals.

13.2 Specify what you hope to achieve.

14 If the project repeats previously reported experiments, give the reasons for the experiments to be repeated.

15 Why is it necessary to use animals in this experiment?

16. What species of animal will be used? (Give the scientific and common name, strain, age, sex and weight if applicable). And why is it selected?

17. How many animals will be required?

18. Identify all factors and procedures that may have an impact on an animal's well-being. This may include handling, housing etc. as well as specific experimental procedures.

19. Describe each factor or procedure in detail, how any adverse impact will be minimized. Details should include treatment substances, dose rates, routes of administration, anesthetic and analgesic regimes etc. if applicable.

20. Who will monitor the animals? Include names, qualifications and experience with the species being used.

20.1 During weekdays?

20.2 At night (if applicable)?

20.3 During weekends and holidays?

21. Where will animals be housed?

22. What will be the maximum and minimum number of animals per cage/pen?

23. What will animals be fed, and how often will they be fed?

24. Where will you get the animals from?

25. Does this project involve the use of any animals that have been the subject of previous research?

Yes  No

26. What has previously been done to these animals during that project? Include project name(s) and identification number(s). if any,

27. What will happen to animals at the completion of the project?

28. Will factors affecting animals determine the endpoint of the project (e.g., tumor size, maximum weight loss)?

Yes  No

If yes, give details.

If No, what will be the end point?

29. If animals are to be euthanized, How and where will this be done?

30. Could animal tissue be shared with other investigators?

## **Declaration by the Principal Investigator**

I certify that the use of animals in this project will conform to the ORIC (NUMS) legislation and the general principles of the institutional animal care and use committee (NUMS) for the Care and Use of Animals for Scientific Purposes. I accept responsibility for the conduct of all procedures detailed in this application and for the supervision of all personnel delegated to perform any such procedures. I confirm that all personnel have read this application and have agreed to comply with procedures described and any conditions imposed by the committee.

Principal Investigator:

(Name and sign.)

Date: \_\_\_\_\_

## **Declaration by Head of Department/School (if applicable)**

I have read this application and am satisfied that the use of animals is justified on scientific, educational or diagnostic grounds.

Head of Department/School: \_\_\_\_\_

(Sign. and stamp)

Date: \_\_\_\_\_

**NATIONAL UNIVERSITY OF MEDICAL SCIENCES**

**IACUC REQUEST LETTER**

**To:               The Chairperson**

**Subject:**

Dear Sir,

1.           We intend carrying out a clinical trial / study entitled, “      ” at (university/institution/hospital).
2.       Following documents are enclosed (as per IRB check list).

a.	1 x institutional review application form	
b.	1 x Animal study/ trial protocol (and any amendments)	
c.	1 x the description of animal use and justification of specie selected for study	
d.	1 x housing /husbandry and animal care details	
e.	1 x Drug’s /Device Brochure and any available safety information	
f.	Certificate of financial / non-financial conflict of interest	
g.	Investigators curriculum vitae	
h.	Confidentiality of data sharing with other allied institutions.	
i.	Any additional document that require approval	

3.       Approval may kindly be granted for above study protocol,

Date: \_\_\_\_\_

Sig: \_\_\_\_\_

Name:

(Principle Investigator)