

Form B (per rule 8(a))*

APPLICATION FOR PERMISSION FOR ANIMAL EXPERIMENTS

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

Part A

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 are presently kept (or proposed to be kept).
5. Place where the experiment is to be performed (Please provide CPCSEA Reg. Number)
6. Date on which the experiment is to commence and duration of experiment.
7. Type of research involved (Basic Research / Educational/ Regulatory/ Contract Research)

Signature

Name and Designation of
Investigator

Date:

Place:

*The filled in Form B having above information / details / supporting documents (1 original + 14 copies and 1 soft copy in CD) should be sent to: -

The Member Secretary,
CPCSEA, Ministry of Environment, Forests & Climate Change
5th Floor, Vayu Wing,
Indira Paryavaran Bhawan
Ali Ganj, Jor Bagh Road,
New Delhi-110 003

7. Animals required
 - a. Species / Common name
 - b. Age/ weight/ size
 - c. Gender
 - d. Number to be used (Year-wise breakups and total figures needed to be given)
 - e. Number of days each animal will be housed.
 - f. Proposed source of animals.

8. Rationale for animal usage
 - a. Why is animals usage necessary for these studies?
 - b. Why are the particular species selected required?
 - c. Why is the estimated number of animals essential?
 - d. Are similar experiments conducted in the past? If so, the number of animals used and results obtained in brief.
 - e. If yes, why new experiment is required?
 - f. Have similar experiments been made by any other organization agency ? If so, their results in your knowledge.

9. Description the procedures to be used.

List and describe all invasive and potentially stress full non-invasive procedures that animals will be subjected to in the course of the experiments.

Furnish details of injections schedule

Substances :

Doses :

Sites :

Volumes :

Blood withdrawal

Volumes :

Sites :

Radiation (dosage and schedules):

10. Please provide brief descriptions of similar studies from invitro / invivo (from other animal models) on same / similar test component or line of research. If, enough information is available, justify the proposed reasons.

11. Does the protocol prohibit use of anesthetic or analgesic for the conduct of painful procedures (any which cause more pain than that associated with routine injection or blood withdrawal)? If Yes, explanation and justification.

12. Will survival surgery be done?

If Yes, the following to be described.

- a. List and description of all such surgical procedures (including methods of asepsis)
- b. Names, qualifications and experience levels of operators
- c. Description of post-operative care
- d. Justification in major survival surgery is to be performed more than once on a single individual animals.

13. Methods of disposal post-experimentation

a. Euthanasia (Specific method):

b. Method of carcass disposal :

c. Rehabilitation :

14. Animal transportation methods if extra-institutional transport is envisaged.

15. 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 therapeutic measures and the mode of disposal of contaminated food, animal wastes and carcasses must be identified)

- (a) Radionuclides
- (b) Microorganisms / Biological infectious Agents
- (c) Hazardous chemicals or drugs
- (d) Recombinant DNA
- (e) Any other (give name)

If, your project involved use of any of the above, attach copy of the minutes of IBC granting approval.