

Institutional Animal Care and Use Committee Office of Research Compliance P.O. Box 173085 Bozeman, MT 59717

Post Approval Monitoring Checklist

| IACUC Protocol#: | | | | | Date: |
|---|--------------------------|-----------------------|-------------------------|--------------------------|---|
| Person/s performing PAM: | | | | | |
| Other associated protocols (e.g., IBC): | | | | | |
| This form is used for Post-Approval Monitoring (PAM) by research, research training, experimentation, biological to Montana State University. As an OLAW-assured institution accordance with the current edition of the "Guide for the Instructions: Complete this form manually while perform "corrected at time of inspection". | esting on, M. Care | g, or SU ho and | relat as mo Use o | ed ac ade a of Lal | ctivities involving live vertebrate animals at a commitment to maintain a program in boratory Animals". |
| Protocol and Personnel | Yes | No | NA | СТІ | Comments |
| The PI and all project personnel have access to the most recent version of the protocol | | | | | |
| Modifications have been submitted for any changes to the protocol, including personnel | | | | | |
| All personnel working on the project are listed on the protocol and have completed ARC and CITI Training | | | | | |
| All personnel on this protocol have reviewed the protocol with the PI or other senior personnel | | | | | |
| Each building and room number where animals are taken outside of the ARC are listed on the protocol | | | | | |
| Additional notes: | | | | | |
| General Procedures | Yes | No | NA | СТІ | Comments |
| Procedures used are the same as those described in the protocol | | | | | |
| Species and numbers of animals are consistent with those in the protocol | | | | | |
| All drugs, fluids, sutures, gloves, and other materials are within expiration dates; no expired items are present | | | | | |
| Only pharmaceutical-grade compounds are used unless otherwise approved in the protocol | | | | | |

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| Controlled substances are stored under double lock and | | | | | |
|--|-----|----------|------|-----|----------|
| key with appropriate records | | | | | |
| Injections and blood/tissue/fluid collections are | | | | | |
| recorded on animal housing cards (amount, date, | | | | | |
| initials) | | | | | |
| Treatments such as antibiotics are recorded on animal | | | | | |
| housing cards (dosages, frequency/time, route, date, | | | | | |
| initials) | | | | | |
| Medical/monitoring/treatment notes are complete and | | | | | |
| compliant with IACUC policies and protocol-specific | | | | | |
| procedures | | | | | |
| Cages/housing/animals are identified by protocol | | | | | |
| number, individual ID, or both | | | | | |
| Additional notes: | | | | | |
| | | | | | |
| | | | | | |
| Anasthasia and Analassia | V | NI. | NI A | CTI | Commonts |
| Anesthesia and Analgesia | Yes | NO | NA | CII | Comments |
| Methods of anesthesia are consistent with the protocol | | | | | |
| Anesthetized animals are monitored according to the | | | | | |
| protocol | | | | | |
| Animal body temperatures are maintained adequately | | | | | |
| throughout surgery/procedure and recovery with | | | | | |
| approved devices as described in protocol | | | | | |
| approved devices as described in protects | | | | | |
| Inhalant anesthetics are used and exhausted properly | | | | | |
| Anesthetic dosages, frequencies, and routes of | | | | | |
| administration are accurately recorded and consistent | | | | | |
| with the protocol | | | | | |
| Analgesic dosages, frequencies, and routes of | | | | | |
| administration are accurately recorded and consistent | | | | | |
| with the protocol | | | | | |
| Analgesics are used for painful procedures or surgeries | | | | | |
| or both (or scientific justification for not using analgesia | | | | | |
| is provided in the protocol) | | | | | |
| Additional notes: | | <u> </u> | | 1 | |
| | | | | | |
| | | | | | |
| Vertebrate Surgery | Yes | No | NA | СТІ | Comments |
| This protocol involves survival surgeries | | | | | |
| This protocol involves major surgeries | | | | | |
| A dedicated, clean, and uncluttered area is used for | | | | | |
| surgery | | | | | |
| Operative field preparation is appropriate for the | | | | | |
| species | | | | | |

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| Aseptic technique is used | | | | | |
|---|----------|----|----|-----|----------|
| Sterile (autoclaved) instruments are used for surgery | | | | | |
| Instruments are disinfected between surgeries (rodents, frogs and fish only) | | | | | |
| Sterile drapes are used | | | | | |
| PPE is consistent with procedures described in the protocol | | | | | |
| Implanted devices are sterilized before use | | | | | |
| Surgical plane of anesthesia reached prior to initiation of surgery and maintained for duration of procedure as described in the protocol | | | | | |
| Only one major surgery is performed on each animal (unless > 1 major surgery is justified in the protocol and approved by IACUC) | | | | | |
| Additional notes: | • | Į. | ı | | |
| Surgery Monitoring | Yes | No | NA | СТІ | Comments |
| A recovery area appropriate for the species is used and animals are monitored until fully recovered | | | | | |
| Adverse consequences of surgery are documented | | | | | |
| Special pre- and post-surgery diets are used as described in the protocol | | | | | |
| Personnel are trained to recognize experimental and humane endpoints and symptoms of illnesses | | | | | |
| Surgical care and post-operative records are available and adequately documented | | | | | |
| Instances when humane endpoints are reached are documented | | | | | |
| Additional notes: | | | • | | |
| Post-procedure Monitoring | Yes | No | NA | СТІ | Comments |
| Animals are monitored post-procedure until fully recovered as described in the protocol | | | | | |
| Adverse consequences of procedures are documented | | | | | |
| Personnel are trained to recognize humane endpoints | \vdash | | | - | |
| associated with the procedures | | | | | |
| Instances when humane endpoints are reached are documented | | | | | |
| Scoring systems (i.e., endpoints) are used as defined in the protocol | | | | | |

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| Breeding | Yes | No | NA | СТІ | Comments |
|--|-----|----------|----|-----|---------------------------|
| What breeding records do you keep? | | | | | |
| Breeding scheme and management is performed per the protocol | | | | | |
| Protocol Transfer Forms have been used to transfer animals to other protocols | | | | | |
| Have any abnormal phenotypes been observed? | | | | | |
| Do any animals need special care? (e.g. special diet, water, gel packs, food on the cage bottom) | | | | | |
| Do you have any strains in maintenance mode? | | | | | |
| Are animals culled? | | | | | |
| Weaning schedule is performed per the protocol | | | | | |
| Genotyping procedures are performed per the protocol | | | | | |
| Instances when humane endpoints are reached are documented | | | | | |
| Additional notes: | | | | | |
| Euthanasia | Yes | No | NA | СТІ | Comments |
| Euthanasia is performed per the protocol | | | | | |
| Animal carcasses are disposed of promptly and correctly | | | | | |
| | | <u>I</u> | | | |
| Additional notes: | | | | | |
| Additional notes: Other | Yes | No | | | If "yes", please describe |
| | Yes | No | | | If "yes", please describe |

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