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**Agricultural Animal Care and Use Committee (AACUC)**

**Protocol Modification Form**

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| Principle Investigator: |  |
| Phone: |  |
| Email: |  |
| Project Title: |  |
| Protocol Number: |  |
| Original Protocol Approval Date: |  |
| Expiration Date: |  |
| Current Date: |  |

1. Provide a brief overview of the proposed modification, including the reason this modification is necessary.

Click here to enter text.

1. As principle investigator, I have determined, by means of the following sources, searches or methods, that alternatives to procedures which may cause pain or distress are not available, and that this protocol does not unnecessarily duplicate previous experiments. Choose an item.
 USDA regulations require documentation (to be maintained by the PI) of the following sources searched. The documentation may be requested by AACUC for review.
	1. Databases searched
	2. Specify all key words that were used in the search (e.g. MESH headings)
	3. What years were covered by the search?
	4. Provide the most recent date on which the search was performed (must be within six months)
	5. Did your search find any alternatives to your proposed animal related procedures that would allow:
		1. Reduction?
		2. Replacement?
		3. Refinement?
2. Describe in detail any new animal-related procedures proposed as part of this modification. *(Depending on the type of animal procedures added, you may be requested to answer additional questions. If necessary, additional questions will be forwarded after AACUC performs the preliminary review.)*

Click here to enter text.

1. Will this modification require an increase in the number of animals from that already approved? Choose an item. If yes, please provide the appropriate justification for the additional animals requested.
2. Animal Numbers
	* 1. Total number of animals (Justification in question #7). Click here to enter text.
		2. Number of animals in Category C (minimal, transient, or no pain/distress, i.e., standard agricultural practices. Refer to the FASS Guide). Click here to enter text.
		3. Number of animals in Category D (pain/distress relieved by appropriate measures). Click here to enter text.
		4. Number of animals in Category E (unrelieved pain/distress). Click here to enter text.
3. Justify the number of animals required for the 3 year duration of the AACUC protocol (check and complete all that apply).

Animals will be assigned to experimental groups. Provide statistical or equivalent justification for the number of groups and number of animals per group. Explain. Click here to enter text.

The procedures are technically difficult and extra animals will be needed to replace failures of the experiment. Explain. Click here to enter text.

This experiment is for obtaining pilot data that will be used to develop or learn new procedures or provide data for planning future studies. Explain. Click here to enter text.

The experiment requires a specific amount of tissue or number of cells for work in vitro. Explain. Click here to enter text.

This protocol is a teaching or training protocol. (If applicable, provide the MSU course number and title.) Explain. Click here to enter text.

Other experimental design or justification. Explain. Click here to enter text.

1. Will you be adding personnel to this protocol not previously included on this protocol? Choose an item. If yes, please list the name, title, and email address for the personnel you will be adding. The Principal Investigator is responsible for insuring that they have read the approved protocol and will comply with all procedures as described.

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| --- | --- | --- | --- | --- |
| Add/Remove | Name | Position Title | Animal Species | Experience or Training |
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|  |  |  |  |  |

Signature: I am aware that electronic submission of this form constitutes my signature.

Check box: 

**The PI should submit the completed form to AACUC Program Manager, Diane Dorgan by e-mail,** **dorgan@montana.edu****. The file can be in the original Word 2007 format or in PDF format.**