## Protocol Synopsis

PI:	Protocol #:			
Title:				
Species:	Approval			
	Date:			
Expiration Date:				
Research Synopsis: The summary (Indicate study goals and procedures to be performed)				

Special Information	Yes	No	Specify
Average Daily Animal Number			
Breeding			
Delayed Weaning (> 21 days)			
Geriatric Animals (>12 months)			
Genetically Engineered/Mutant			
Animals			
Genotyping			
Tail or Other			
Identification Methods: Ear Tag, Ear			
Punch, Microchip, Tattoo, Toe Clip		T	
Individual Housing			
Non-Standard Caging			
Wheel, metabolism, sterile, other			
Cage Change Frequency			
No/Limited Environmental Enrichment			
Please Specify			
Food/Water: Restrictions or special diet,			
medicated water			
Please Specify			
Animal Removed from Animal Facility			
• If yes, where?			
Reason for removal			
Animals Returned to Animal Facility			
• If yes, where?			
Survival Surgery			
Post-operative Analgesia			
Please Specify Drug			
• Frequency		_	
Terminal Surgery			
Behavior Testing			

	Special Information	Yes	No	Specify
Tumo	rs			
•	If yes, please specify location:			
Injecti	ons			
•	IP, IV, SQ, IM, ID (specify all that apply)			
•	Location			
•	Volume			
•	Frequency			
	nistration of Substances Which Cause Pain			
•	Location			
•	Volume			
•	Frequency			
•	Signs to monitor			
Oral G	Oral Gavage			
•	Volume			
•	Frequency			
Blood	Collection			
•	Method			
•	Volume			
•	Frequency			
Anest	hesia			
•	Туре			
•	For what procedures?			
Illness	(Illness is possible or expected?)			
•	Monitoring frequency			
•	Endpoint (How long animals are kept post-procedure?)			
•	Euthanasia criteria			
•	Euthanasia method			
•	Secondary method			
•	Disposition(Euthanasia, Transfer, Adoption)			
Bio-Ha	Bio-Hazards			
•	Biosafety Level			
•	PPE			
•	Procedures			
Chemical Hazards				
•	PPE			
•	Procedures			
•	Others			

Personnel						
Name	Office Phone	Email	Cell Phone/Pager	Emergency Contact?		
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		
				Yes No		