SUPPLEMENTAL PROTOCOL INFORMATION -- SURVIVAL SURGERY INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE

San Francisco State University

This form need only be completed if surgical procedures are performed on live animals, and if the animal is expected to survive after surgery is completed. It is not required for minor surgical procedures, such as injection or bleeding, or for euthanasia.

1. Protocol Ti	tle:					
2. Principal In	vestigator:					
3. School, Division or Department:						
4. Species, strain and sex of animals:						
5. Estimate of	f the number o	f animals to be	used annually:			
questions 6a. a. Experimen	through 6g. to	avoid duplicat	ion of informati	on.) ological materia	: Please refer to als, reference or Iministration	
Agent	Vehicle	Route	Volume	Frequency	Duration	
f yes, describ	be collected from	nount,	N	lo 🗌 Yes		
c. Will animal		•	zed during the	study other tha	ın for surgical	

If yes, describe				
d. Will unanesthetized animals be restrained by chairs, slings, tethers, stanchions orother devices? If yes, please explain: No Yes				
Method of restraint:				
Duration of restraint:				
• Frequency of restraint:				
Observation during restraint:				
e. Will animal be deprived of food greater than 24 hours or water greater than 24 hours? No Yes If yes, provide a justification and description of monitoring				
procedures.				
f. Are surgical procedures employed? No Yes If yes, complete this section. If no, go on to 6g (euthanasia).				
(1) Check the statement that describes your project: Non-survival surgery (animals are euthanized under anesthesia without regaining consciousness) Minor survival surgery Major survival surgery (penetration and exposure of a body cavity, or resulting in a permanent impairment of physical or physiologic functions).				
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(3) Location where surgical procedures will be performed: LAF Aseptic Surgery Area Other
(4) Preoperative care, anesthesia, monitoring/supportive care during surgery, and post-operative care: To be determined and performed by the LAF Veterinary services Group in consultation with LAF veterinarian. (Contact LAF to ensure adequate resources are available). OR As detailed below: Preoperative care (type, dose, route of administration of antibiotics, sedatives, medications prior to induction of anesthesia or the special care such as fluids, fasting, etc.):
Anesthesia/Analgesia (type, dose, route of administration of anesthetics, analgesics or sedative/tranquilizing agents employed to prevent pain and distress during surgery):
Monitoring and augnority a core during augnory
Monitoring and supportive care during surgery:
Post-operative care (survival procedures only): Location and frequency of observation/monitoring during the critical anesthetic and surgical recovery period, including arrangements during weekends, holidays and non-working hours, if appropriate:
Supportive care (fluids, oxygen, etc.) and drug therapy (antibiotics, analgesics, etc., including route of administration, frequency and dose):
g. Describe method of euthanasia to be used. Even if euthanasia is not a planned aspect of the project, you should provide a plan for euthanizing injured or diseases animals.

Euthanasia? No Yes	of the 1993 AVMA Panel on				
Please be certain that your narrative description provides a appropriateness of the species and numbers of animals to considered and rejected alternatives to animal research, an ensure that animals remain comfortable.	be used. You must demonstrate that you have				
The attending veterinarian, or designee, must be consulted in the planning of potentially painful/distressful procedures.					
Space below for IACUC use only:					
Signature of SFSU Attending Veterinarian	 Date				