**Radford University IACUC**

**Protocol Amendment Form**

**Instructions:** Please complete the below form and generate a revised version of the appropriate current approved protocol with the below described changes highlighted in yellow. Information to be deleted should be clearly indicated as such, but not deleted.

Please submit both forms to the IACUC Office for processing. Please note that requested changes may not be implemented until an amendment approval letter has been received by the PI.

**Section 1 - Protocol Information:**

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| --- | --- | --- |
| **IACUC Protocol Number: FY** | **Amendment Number:** | **Date Amendment Submitted:** |

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| --- | --- | --- | --- |
| **Title of Protocol:** |  | | |
| **Research Personnel:** | **Name:** | **If Changed From Previous Submission or Not in RU Directory:** | |
| **Email Address:** | **Phone Number:** |
| **Principal Investigator:** |  |  |  |
| **Second Investigator** (if any)**:** |  |  |  |
| **Third Investigator** (if any)**:** |  |  |  |

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| **Highest USDA Pain Category of Original Approved Submission:** |
| **Does the requested modification represent a change in USDA Pain Category?**  Yes  No  If Yes, please indicate the change(s) in Section 3 below. |

**Section 2 - Animal Use Information:**

|  |  |  |  |
| --- | --- | --- | --- |
| Species Common Nameand Strain (if applicable) | Animal Use NumbersOriginally Approved | Animal Use Numbers Currently Approved(if added via earlier amendments.) | New Total Animal Use Numbers (if animal use numbers modifications are requested below.) |
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| Does the study involve species on State or Federal lists of threatened or endangered species?  Yes  No |

**Section 3 - Modification Request Information:**

1. **Provide an itemized summary of the changes requested. Also, provide a highlighted copy of the most recently approved Word version of the main submission form, and any affected appendices, illustrating the requested changes.**

|  |  |  |
| --- | --- | --- |
| **Requested Modification or Addition** | **Original Version to be Modified, If Any** | **Rationale for Modification, Addition or Deletion** |
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1. **Provide any additional rationale(s) for the request(s). Attachments may be utilized.**

1. **Provide the scientific justification, including literature citations as appropriate, for any modifications requested. The justification should be provided both in the text block below and in the main submission form (highlighted), if needed, or mark Not Applicable below.** (Examples include any animal use changes to a Category E submission, the addition of euthanasia without the benefit of prior anesthesia, significant increases in animal numbers, etc.)

Not Applicable.