Applicant: only fill in the mint green boxes. Don’t forget the questions in red.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Stipulations CCD:  No  Yes | | | | |
| Stipulations IvD Utrecht:   1. Report changes to the IvDU ([info@ivd-utrecht.nl](mailto:info@ivd-utrecht.nl)) 2. Report unforeseen dead animals and animals with unexpected discomfort to the IvD Utrecht ([info@ivd-utrecht.nl](mailto:info@ivd-utrecht.nl)) and the animal facility.   3. Extra stipulatons: | | | | |
| **Approved AWB:** name |  | Stamp AWB Utrecht | When the animals are not killed immedi­ate­ly: conclusion of work protocol |  |
| Date: date | | Date: Date | |
| **Number work protocol** | | Initials: | |
| **18603-** | | When the work protocol is concluded, send a welfare evaluation to [info@ivd-utrecht.nl](mailto:info@ivd-utrecht.nl) | |

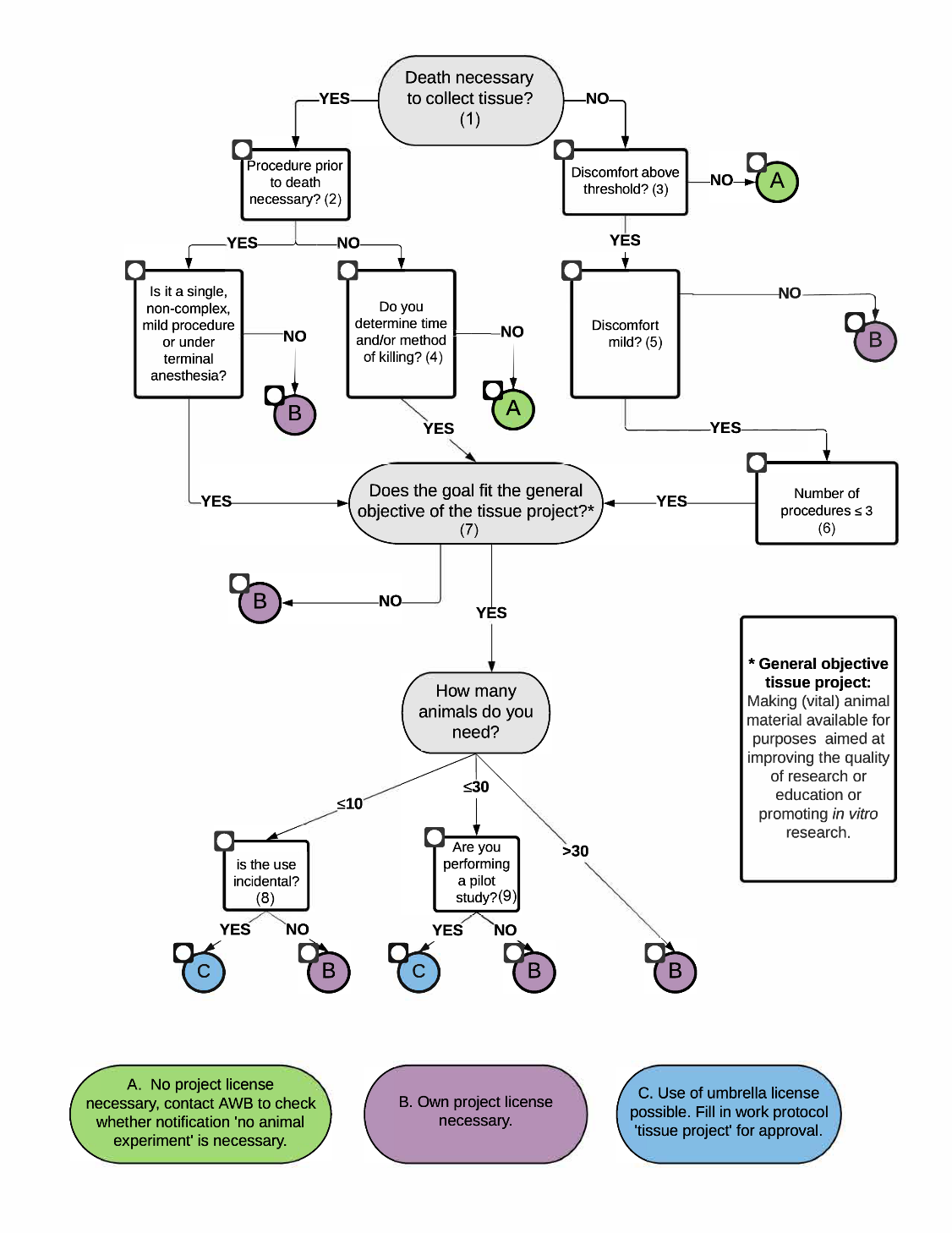
|  |  |  |  |
| --- | --- | --- | --- |
| Project number (CCD): | [AVD10800202418603](https://ivd-utrecht.nl/nl/verantwoording/vergunningen/gebruik-van-bloed-organen-en-weefsels-van-dieren-voor-het-verbeteren-van-de-kwaliteit-van-onderzoek-en-onderwijs) | Principal investigator of the project (name + email) | M.C.M. Luijendijk; [m.c.m.luijendijk@uu.nl](mailto:m.c.m.luijendijk@uu.nl) |
| Project title: | Gebruik van organen en weefsels ter bevordering van kwaliteit van dierproeven en van in vitro en ex vivo onderzoek  *(Use of organs and tissues to advance the quality of animal experiments and in vitro research)* | | |
| End date CCD license | 13-5-2030 | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Unique title of the work protocol |  | | | | | | |
| Type experiment (appendix CCD project): | Choose | | Animal facility: | | Choose | If performed in GDL: section(s) | Choose an item. |
| Planned period for collection of tissue: | | Date until Date | | When animals are not killed immediately: cost centre/WBS | |  | |

*Indicate* ***below*** *the* ***alarm icon*** *(in numbers) who is the first (1) and second (2) point of contact for animals with unexpected discomfort or animals found dead.*[](https://ivd-utrecht.nl/en/infocentre/video/unexpected-discomfort-in-laboratory-animals)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Parties involved: |  | First + last name | Initials | Mobile phone | Email | Qualification | Faculty/Institute/ Department |
| Study Director (SD) |  |  |  |  |  | Art. 9 |  |
| Alternate Study Director (ASD) |  |  |  |  |  | Choose |  |
| Departmental Lab Animal Coordinator |  |  |  |  |  |  |  |
| Co-worker |  |  |  |  |  | Choose |  |
| Co-worker |  |  |  |  |  | Choose |  |
| Co-worker |  |  |  |  |  | Choose |  |
| Co-worker |  |  |  |  |  | Choose |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Contact person Animal facility *(Will be filled in by the facility)* |  |  |  |  |  |  |
| Contact person  Animal section *(Will be filled in by the facility)* |  |  |  |  |  |  |

Decision tree for 1.a.1.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
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***Explanation decision tree***

1. Is the death of the animal necessary to obtain the tissue?  
   If the tissue can be obtained by a procedure that causes no more than mild discomfort to the animal and does not cause permanent damage, death of the laboratory animal is not considered necessary.
2. Is a procedure prior to death necessary?  
   What is meant is, is a procedure prior to death necessary to obtain suitable tissue, for example, an injection for labelling cells.
3. Is the discomfort above the threshold?  
   ‘Above threshold’ means all procedures that cause as much discomfort or more than the skilled insertion of a needle. Examples of sub-threshold procedures are: cutting hair or removing cheek mucosa. Examples of above threshold procedures are: an injection or biopsy.
4. Does the researcher determine the time and / or method of killing?  
   When surplus animals are on offer and their death is planned due to redundancy, and the planned time or planned method of killing is changed at the request of or in consultation with the receiving researcher, the answer to this question is YES.
5. Is the discomfort more than mild?  
   If the planned procedures and any discomfort that may result are assessed as more than mild, a separate project licence is required.
6. Are there 3 or more procedures needed? If there are 3 or more procedures with mild discomfort, a separate project license is required.
7. Does the objective of the use of tissue fall within the umbrella objective of this project: namely to improve the quality of the research or education concerned or to promote in vitro / ex vivo research?
8. Is the use incidental?  
   Incidental use is when you want to use a small number of animals (<10) no more than twice a year.
9. Are you performing a pilot study?  
   A pilot is when you want to conduct a pilot experiment no more than twice, for example in preparation of writing your own project application.

1. Description of the experiment (See [Guideline experimental design and statistics](http://www.ivd-utrecht.nl/en/advice-and-support/forms-and-guidelines/))

|  |
| --- |
| a. **Abstract:** Please give a short summary (5 sentences) of the e**xperiment with the purpose of the study** in ****lay language****. |
|  |
| Also give the short summary in ****Dutch for lay people****. |
|  |
| * 1. Did you fill in the decision tree above and did it lead to option C?  No  Yes.  If No, this WP is either not necessary to acquire the animal tissue (option A) or you need a separate project licence (option B). If Yes, is the tissue use incidental or for a pilot study?  Incidental (proceed to question 2)  pilot (proceed to question 1a.2) |
| *Optional explanation* |
| **a.2. Give a short description of the study for which this pilot is necessary. Include the added value of the pilot for this study:** |
|  |

# 2. Animals

## a. Species to be used: Choose

|  | Breed/strain name | Who do you receive the animals from? | WP number of original use of the animals | Discomfort1 | Number of animals | Sex | GM | Microbiological status | Date of birth |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| A |  |  |  | Choose |  | Choose | Choose | Choose |  |
| B |  |  |  | Choose |  | Choose | Choose | Choose |  |
| C |  |  |  | Choose |  | Choose | Choose | Choose |  |
| 1 If animals have experienced severe discomfort, their use is only allowed in studies in which they are killed without prior procedures. | | | | | | | | | |
| b. Will animals be killed immediately?  No (proceed to question 3)  Yes (proceed to question 7) | | | | | | | | | |

# 3. Housing

| Experimen­tal group | Group housing | Bedding | Enrichment | Food1 | Water1 | Housing types |
| --- | --- | --- | --- | --- | --- | --- |
|  | Choose | Choose | Choose | Choose | Choose | Choose |
|  | Choose | Choose | Choose | Choose | Choose | Choose |
|  | Choose | Choose | Choose | Choose | Choose | Choose |
|  | Choose | Choose | Choose | Choose | Choose | Choose |
| Are the animals temporarily housed in a way other than the above during the experiment?  Yes, state method and duration: | | |  | | | |
| Explanation of different housing requirements: | | |  | | | |

**1In case of not standard feed/drinking water: Fill in ‘**[**hazardous substances overview’**](#_Risicovolle_Stoffen_2)**.**

# 4. Describe consecutive procedures HL seen by AWB and UH

## a. Acclimatization: 1 week other: please define

## b. Tabel 4. Schedule of experimental procedures

| Line | Relative day in experiment | Exp. group | Description of the procedure | Dura­tion proce­dure | Description of discomfort during and because of the procedure | Dura­tion discom­fort | Estimated level of discom­fort | Who |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  | Choose |  |
|  |  |  |  |  |  |  | Choose |  |
|  |  |  |  |  |  |  | Choose |  |
|  |  |  |  |  |  |  | Choose |  |
|  |  |  |  |  |  |  | Choose |  |

|  |  |
| --- | --- |
| Exp. group | cumulative discomfort |
|  | Choose |

# 5. Anaesthesia and analgesia

#### a. Will anaesthesia be administered? No Yes; please fill out the table below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Anaesthesia | Substance (including brand name) | | Route of administration | Dose |
| Premedication agent |  | |  |  |
| Introductory agent |  | |  |  |
| Maintenance agent |  | |  |  |
| *Optional:*  Antagonize agent |  | |  |  |
| **Ventilation with intubation:** | | **No**  **Yes** | | |
| **How is the depth of anaesthesia monitored?** | |  | | |
| **Optional: explanation anaesthesia** | |  | | |

## b. Will analgesia be administered? No Yes: If so, please fill out the table below

| Analgesia | Procedures | Substance (optional brand name) | Route of administration | Dose | Interval | Duration |
| --- | --- | --- | --- | --- | --- | --- |
| Pre-surgical agent |  |  |  |  |  |  |
| Agent during surgery |  |  |  |  |  |  |

# 6. Welfare check and humane end point

## a. Regular welfare check

Starting point is that the animal and the accommodation are checked **daily** at all times (from the moment the animals enter the facility). This is a routine check for calamities.

**At least once per 7 days a thorough check of the animal's welfare is performed on the basis of behaviour, posture, gait/mobility, food intake/weight loss, grooming/auto mutilation and other striking clinical symptoms.** Findings of this welfare check are noted in the **Welfare Logbook.**

## b. Humane end point/premature withdrawal of animal(s)

When a humane end point (HEP) is applied, the experiment is prematurely terminated for an individual animal or a group (i.e. before the planned end of the experiment). The goal of the HEP is to prevent avoidable discomfort. There can be three reasons to apply a HEP. You are requested to indicate for I and II which criteria you use.

|  |
| --- |
| I. The discomfort of an individual animal that is inherent to the experiment exceeds the maximum discomfort described in the project Describe for which clinical symptoms (specify degree and seriousness) and on basis of what criteria (optional) a HEP is applied. |
|  |
| Describe the HEP also in Dutch |
|  |
| II. The scientific goal is reached Describe –on animal level– when the scientific end point has been reached and what the criteria are to withdraw an animal from the experiment. |
|  |
| III. The scientific goal can no longer be reached For example: an animal is found to be unsuitable for sampling |
|  |

# 7. Estimated maximum discomfort per experimental group

| Experimental group | Estimated maximum discomfort | Description of discomfort (on the basis of type and number of procedures – see table 5.b- and clinical symptoms- see table 6.b)) |
| --- | --- | --- |
|  | Choose |  |
|  | Choose |  |

# 7. Dead animals during the experiment

|  |  |
| --- | --- |
| **Describe how and/or where animals that are killed or found dead should be stored.** |  |

# 8. Destiny of animals at the end of the experiment

If the laboratory animals are suitable for reuse or relocation afterwards, or if you do not need the whole animal for further research, then make the animals, or tissues thereof, available via the [Animal and Tissue Exchange platform](http://www.atex.uu.nl) (ATEX). When you use large animals (≥rabbit) offering residual tissue through ATEX is compulsory.

| Experimental group | Destiny | If euthanasia: method |
| --- | --- | --- |
|  | Choose | Choose |
|  | Choose | Choose |
|  | Choose | Choose |
| Clarification other method of euthanasia |  | |

# Table Code numbers according to NVWA-registration

Please complete the table below in advance as a preliminary step.

The Study Director is required to submit the fully completed welfare evaluation form (which includes the table below detailing the discomfort actually experienced) to the Animal Welfare Body (IvD) at [info@ivd-utrecht.n](mailto:info@ivd-utrecht.n) and to the laboratory animal coordinator of their own department within two weeks after completion of the work protocol (or earlier, in the case of transition to a new calendar year). The data from this form will be used for the statutory required annual registration.

Fill in all the mint green columns. Only complete the grey columns if applicable (i.e. do not specify the strain of mouse or rat). Specify ‘other species’ in Latin.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| EU Submission | Number VGH | CCD nr | OWE | Animal Species | Specify other (in Latin) | Number of Animals | Re-use | Place of birth | NHP Place of birth | NHP Colony type: Self-sustaining colony | NHP Generation | Genetic status | Creation of a new GA line | Purpose | Specify other | Type of legislation | Specify other | Origin of legislation | Severity | Custom Severity | Explanation of warnings | Comments for NVWA (in English) | Method of tissue sampling | Specify other method | Severity of genotyping | Anaesthesia | Analgesia | Kill without prior intervention | State after experiment | Work protocol number | Own comments | WP where animals originate from |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
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| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |
| Choose | 10800 | AVD10800202418603 | 10888 | Choose |  | Enter number | [Y] Yes |  |  |  |  | Choose | [N] | Choose |  |  |  |  | Choose |  |  |  |  |  |  | Choose | Choose | Choose | Choose | Enter tekst |  | Enter tekst |