

IACUC Holding Protocol

DHHS/NIH/OLAW ASSURANCE D16-00135 (#A-3216-01)
EFFECTIVE: 06/12/2018 – 03/31/2022

Please Note:

- No experimental or instructional animal procedures are allowed while animals are on the UW Holding Protocol
- The original protocol's Principal Investigator (PI) or their designee must complete this form
- UW's Attending Veterinarian (AV) will be named as the PI of the Holding Protocol, but **day-to-day animal care costs and responsibilities will still be the sole responsibility of the original PI.**
- A UW Animal Transfer Form **must** be completed and submitted with this application
- Only one Protocol may be added to a Holding Protocol; additional Holding Protocol Forms & Animal Transfer Forms may be required
- For more information, refer to UW IACUC Guideline 03-01: IACUC Holding Protocol

FOR IACUC USE

Protocol # _____

Approved for period (60-day maximum)

Approved _____ to _____

Copy to PI _____

Copy to Animal Care Worker _____

PLEASE COMPLETE ALL OF THE INFORMATION BELOW

Form must be typed, handwritten forms will be returned without review

PROTOCOL INFORMATION

Date Submitted: _____

Current Protocol #: _____

Investigator: _____

Federal Funding Grant #: _____

Submitted by: _____

Phone: _____

Department: _____

Email: _____

Is ANY portion of this protocol federally funded? Check One: YES NO

Anticipated length of time on IACUC Holding Protocol (60-day maximum): [Click or tap here to enter text.](#)

Reason for Request (check all that apply):

- Expired/Lapsed Protocol
- IACUC requirement
- Original PI leaving UW
- Original PI newly-arrived to UW
- Other (please explain): [Click or tap here to enter text.](#)

Does ANY portion of this protocol involve work approved by the UW:

- Radiation Safety Committee
- Institutional Biosafety Committee

Effective 07/01/2020

Version 01

Approved by:



Dr. R. Scott Seville, IACUC Chair, University of Wyoming



Dr. David R. Evertson, IACUC Attending Veterinarian, University of Wyoming

ANIMAL INFORMATION

Species: _____

Strain(s) and/or Breed(s) (Include exact numbers): _____

Animal Location (include bldg/room #): _____

Animal IDs (if applicable): _____

TOTAL # of animals (not cages) to be transferred and held: _____

Are there any pregnant females currently in the study? YES NO

If Yes, list anticipated due date(s): _____

Are there any pre-existing conditions of note (i.e. surgical implants or impairments, special diet/water/lighting requirements, poor fecundity, zoonotic or infectious disease potential, viral vectors, past survival surgery, genetic anomalies, etc.; attach additional pages if necessary for completeness): _____

Email completed IACUC Holding Protocol Form & Animal Transfer Form to iacuc@uwyo.edu

Holding Protocol will begin immediately upon final approvals by the IACUC, and approved copies will be returned to:

- IACUC Chair
- IACUC AV
- IACUC Compliance Coordinator
- Director of Research Integrity & Compliance
- Original PI
- Direct supervisor to Original PI