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| FOR IACUC OFFICE USE ONLY | |
| **伦理编号:** |  |
| **伦理通过时间:** |  |
| **伦理过期时间:** |  |

**实验动物福利伦理审查表（2024第一版）**

**1. 电子表（word）通过邮件发送到: iacuc@him.cas.cn**

**2. 审查通过后，将签字版纸质文件送动物实验平台：和达药谷4期2号楼1006**

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| **项目负责人**  **Principal Investigator** | | |  | | **部门或外单位名称**  **Department** | |  |
| **电子邮箱**  **Email** | | |  | | **办公室地址及电话**  **Office Add & Tel** | |  |
| **项目名称**  **Program** | | |  | | **项目来源和编号**  **Sponsor and No.** | |  |
| **拟开展动物实验时间**  **Project Start and End Dates** | | | | **年 月 日 至 年 月 日**  **From: MM/DD/YYYY to MM/DD/YYYY** | | | |
| **列出本研究中所有从事动物工作的人员。所有人员在进入动物设施或开始本研究工作之前，须完成实验动物从业人员的相关培训。**  **List all personnel working with animals in this study. All personnel must have completed the training before entering animal facilities or beginning work on this study.** | | | | | | | |
| **姓名**  **Name** | **电话**  **Phone** | **邮箱**  **Email** | | **本研究中承担的任务**  **Responsibility in this study.** | | **动物实验操作相关经验、培训、资质和能力的描述，有证书的提供编号**  **Describe the qualifications, training and experience related to this protocol. Provide certificate number if you have.** | |
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| **简要描述动物实验项目的目的、必要性、意义**  **Experimental objective，necessity and significance** | | | | | | | |
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| **拟使用动物信息Animal to be used**  每种动物品系填写一个单独的栏。如果要使用3个以上的物种或品系，可复制此表并适当插入。  Complete a separate column for each animal species or strains to be used. If more than 3 species or strains are to be used, duplicate this table and insert appropriately. | | | |
|  | 1 | 2 | 3 |
| 品种/品系  Strain |  |  |  |
| 等级  Level | 普通级（CV）  SPF级  无菌级（GF） | 普通级（CV）  SPF级  无菌级（GF） | 普通级（CV）  SPF级  无菌级（GF） |
| 周龄/体重  Age/Weight |  |  |  |
| 性别及数量  Gender & Number | M： 只  F： 只 | M： 只  F： 只 | M： 只  F： 只 |
| 来源  Source | 商品化动物  Commercial supplier  国外引种\*  Introduced from abroad  其他（Others）\* | 商品化动物  Commercial supplier  国外引种\*  Introduced from abroad  其他（Others）\* | 商品化动物  Commercial supplier  国外引种\*  Introduced from abroad  其他（Others）\* |
| \*国外引种，或其他来源的动物，请填写详细信息：For animals introduced from abroad or from other sources, please provide detailed information: | | | |
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| **选择实验动物种类和数量的原因:** 1）说明为什么必须使用动物，而不能用非动物替代品；2）说明动物品种选择的原因；3）说明动物数量选择的标准。4）是否涉及重复实验。  In scientific language, explain the specific aims or objectives of the project and why the study is important to human and/or animal health. 1）Justify why animals are required over non-animal alternatives:2）Justify appropriateness of species selected; 3) Justify number of animals to be used: 4) Justify duplicative research. | | | |
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| **实验设计和动物实验操作步骤 (Experimental Design and Animal Procedures)：**  详细描述实验设计及动物实验内容。内容中(根据具体情况)需包括以下内容（强烈建议使用流程图）：  1.每个实验的具体目的和主要结果。  2.对动物进行的所有操作流程。  3.每个实验的实验组、组大小和动物数量。  Describe the experimental design and all animal procedures below. Organize each experiment by number or letter. Flow charts are highly recommended.  For each separate experiment, include:  1.Specific aim and the major outcome of each experiment.  2.All procedures performed on animals.  3.The experimental groups, group size and animal numbers of each experiment. |
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| **如进行存活手术，请完成下列选项：**  **If survival surgery is proposed, complete the following:**  列举手术项目并简述手术步骤，包括所采用的消毒方法。若需要重复对同一动物进行多次手术请详细说明原因：List and describe the surgical procedure(s) to be performed, include the aseptic methods to be utilized. Multiple surgical procedures on a single animal must be justified. |
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| **麻醉, 止痛, 镇静:**  **Anesthesia, Analgesia, tranquilization**  请指出对于相关动物使用所涉及的所有麻醉剂, 镇痛药, 镇静药或镇定剂，包括试剂名称，来源，剂量, 给药方法和给药时间.  List all anesthetic, analgesic, or tranquilizing drugs, including agent name, source, dose, route and frequency. |
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| **仁慈终点或实验终结的指标(Humane endpoint or experimental terminative indicator)** |
| 仁慈终点标准：  1.体重减轻：体重减轻达20-25％，或是动物出现恶病质或消耗性症候时。  Weight loss: weight loss of 20-25%, or cachexia or wasting syndrome.  2实体瘤的大小超过动物体重的10%。  Solid tumors are more than 10 percent of an animal's body weight.  3.丧失食欲：小型啮齿类动物完全丧失食欲达24小时或食欲不佳（低于正常量之50％）达3天时动物完全丧失食欲达5天或食欲不佳（低于正常量之50％）达7天时。  Loss of appetite: complete loss of appetite in small rodents for 24 hours or up to 3 days (50% less than normal).Large animals completely lost their appetite for 5 days or had poor appetite (less than 50% of the normal amount) for 7 days.  4.虚弱（无法进食或饮水）：动物在没有麻醉或镇静的状态下，无法进食或饮水，长达24小时无法站立或极度勉强才可站立时。  Weakness (inability to eat or drink) when an animal is unable to eat or drink for up to 24 hours without anesthesia or sedation and is unable to stand or can stand only with extreme reluctance.  5.垂死/濒死：动物在没有麻醉或镇静的状态下，表现精神抑郁伴随体温过低（低于37℃）时。  Dying: when an animal presents with depression accompanied by hypothermia (below 37℃) without anesthesia or sedation.  6.感染：在抗生素治疗无效并伴随动物全身性不适症状出现时。  Infection: when antibiotic treatment fails and symptoms of systemic malaise develop in the animal  a.器官：出现器官严重丧失功能的临床症状且治疗无效，或经动物中心兽医师判断预后不佳。  Organs: clinical symptoms of severe organ loss and ineffective treatment, or poor prognosis as determined by animal center veterinarians.  b.呼吸系统：呼吸困难、发绀大失血。  Respiratory system: difficulty in breathing, cyanosis and massive blood loss.  c.心血管系统：大失血、已给予一次输液治疗后仍贫血（低于20％）。  Cardiovascular system: large blood loss, anemia after one infusion (less than 20%)  d.消化系统：严重呕吐或下痢，消化道阻塞，套迭，腹膜炎，内脏摘除手术。  Digestive system: severe vomiting or dysentery, digestive tract obstruction, peritonitis, peritonitis, evisceration  e.神经系统：中枢神经抑制、震颤、瘫痪（其中任一肢或以上）、对止痛剂治疗无效之疼痛。  Nervous system: central nervous suppression, tremor, paralysis, pain that is not treated with analgesics  f.肌肉骨骼系统：肌肉受损或骨折使肢体丧失功能。  Musculoskeletal system: loss of limb function due to muscle damage or fracture.  g.皮肤：无法治愈之伤口、重复性自残或二级以上之保温垫烫伤。  Skin: untreatable wounds, repetitive self-injury, or scald of thermal insulation pad above grade 2.  **或填写实验终结的指标（Fill in the indicators of the end of the experiment）** |

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| **动物处死方法(Death conduct)** |
| 1.二氧化碳气体（推荐使用 Recommended）  2.颈椎脱臼致死\* cervical vertebra dislocating  3.麻醉后放血致死 Exsanguinating after anesthesia  4.麻醉过量致死\*\* anesthetic overdose  5.其他others  \*颈椎脱臼致死是不推荐的，假如执行颈椎脱臼致死，请说明科学必要性：  Cervical vertebra dislocating is not recommended, please indicate science necessity if performing.  \*\*请说明动物处死麻醉剂名称，使用剂量、频率以及给药途径：  Please list name, dose, frequency and rout of anesthetic agent: |
| **非处死动物的处置方式(Not for the death of the animal disposition)** |
| **继续使用(continue to use)**  **保存在设施内(save in the facility)**  **其他(others)：** |
| **危险物质Hazardous agents:** |
| 危险物质分类：  1. 放射性同位素Radionuclides  2. 致癌物/致突变物 Carcinogenic material  3. 危险药品，含国家管制的麻醉和精神药品 Hazardous drugs  4. 化学有害物Hazardous Chemicals  5. 感染物质 Infectious Substance  6. 其他有害物质 Other hazardous substance  **本计划不使用任何危险物质 The study doesn’t involve any hazardous agents.**  **本计划使用危险物质**（请详细描述具体的物质名称、毒性、拟使用剂量、给药方式、来源、批准过允许使用的文件，，并简述安全操作和及处理受污染动物及材料的方法及程序。）The study involves hazardous agents. (Describle all hazardous agents name, toxicity, dose, route，source and documents approved for use . Please describe procedures for safe handing of contaminated animals and materials.) |
| **生物材料/使用的动物产品 (如质粒、细胞系、组织或抗血清等)**  **Biological materials/Animal products (e.g. plasmid, cell line, tissue or antiserum,etc.)** |
| 1. 名称(Name):  2. 来源(Source): 鼠(Rat) 兔(Rabbit) 人(Human) 其他（Others)：  3. 其他需说明事项(Other items )： |

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| **研究特殊要求或需求: Special concerns or requirements**  1.是否因使用特殊实验设备（或其他因素）而需要带实验动物活体出入实验动物设施，详细说明原因  If live animals must in/out laboratory animal facility, due to special equipment requirements(or other factors), please state the reasons.  2.是否需要使用特殊专用笼具，或特殊动物照料（如需要禁食、禁水、单笼饲养、限制活动、特殊饲料及笼具、或废物处理等），解释其必要性  List any special caging and animal care (e.g. food restriction, water restriction, special diet and caging, or waste disposal, etc.) |
| **相关的补充说明或辅助证明文件**  **（Supplementary instruction or any auxiliary documents）** |
| **信息公开和保密要求：**说明哪些信息需要保密，哪些信息可以公开  **Information disclosure and confidentiality requirements: describe what information needs to be kept confidential and what information can be made public.** |
| **对伦理委员有无回避要求**  **Claiming jurors for being debarb.** |

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| **实验负责人（PI）承诺：**  **Principal Investigator Certifications and Acknowledgments:**  1. 我保证在此处提出的研究方案不是毫无意义的重复或已被报道过的研究。  I certify that I have determined that the research proposed herein is not unnecessarily  duplicative or previously reported research.  2. 我保证有权进行实验的人员已经过相关培训，且接受了生物学、操作、动物护理方面的训练及必要的无菌手术方法和技术。  I certify that the individuals have attended training. Training may include but not limited to the biology, handing, care of the species and necessary aseptic surgical techniques.  3．我保证有资质进行实验的人员将力求限制动物使用或将不良应激减少到最小，合理使用镇痛药、镇定剂和麻醉剂。本人确信将任何影响动物的非预期的实验结果告知本研究所实验动物福利伦理审查委员会（IACUC）。任何未预期的疼痛和紧张、疾病和死亡都会向主管兽医和IACUC报告。  I certify that the individuals listed will limit the use of animals or minimize distress, proper use of analgesics, sedative and anesthetics. I certify that any unexpected experimental result will be reported to IACUC, and any unexpected pain, distress, illness and death will be reported to the attending veterinary and IACUC.  4. 我保证该研究方案会正确使用和处理危险试剂及生物材料。  I certify that the protocol will use and dispose hazardous agent or biological material correctly.  5. 我保证实际实验操作与本实验方案相符，若该研究方案有重大变更（包括实验重大设计、人员变化、动物使用数量及实验进行时限等方面），事前一定获得本研究所实验动物福利伦理审查委员会（IACUC）的许可。  I will conduct this work with animals in accordance with the protocol as approved by IACUC. I will obtain approval from IACUC before initiating any changes (including experimental design, individual change, animal number and time covered) in the protocol.  6. 我保证遵守本研究所实验动物福利伦理审查委员会（IACUC）制定的各项规章制度，且熟知并遵守国家相关方面的法规法令。  I acknowledge responsibility of complying with the rules and regulations of IACUC, and related legislation.  **声明人：课题负责人（PI）签（章）**  **Declarant: Signature (stamp) of PI**  **动物实验负责人签（章）**  **Signature （stamp）of Director of animal experiment**  **年 月 日**  **Y M D** |

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| **主管兽医意见**  **Opinion of Veterinary of institution**  **批准Approval** **不批准Unapproved** **建议改进Revise needed**  **不批准原因或建议改进意见如下Reasons for unapproved or revise suggestions：**  **主管兽医签（章）：**  **Signature（stamp）Veterinary**  **年 月 日**  **Y M D** |
| **福利伦理委员会审批意见**  **Approval opinion of committee**  **审查委员表决**  **Inspection by members：Agree（）；Disagree（）**  **主任委员签（章）：**  **Signature（stamp）of Chairman of committee**  **年 月 日**  **Y M D** |
| **备注：** **初审；****第 次审查。**  **Remarks:**  **first trial；** **reexamine No. .** |