

ACUC Approval Date: 2/14/08

NIMH Guideline # G1

Date Issued:

Date(s) Revised

TITLE: Addition of Personnel to an Animal Study Proposal (ASP)

I. General

A. Prior adding an individual to an ASP, the PI must ensure that

1. The individual has completed the course 'Using Animals in Intramural Research: Guidelines for Animal Users'. This course can be found by accessing the OACU training page at <http://oacu.od.nih.gov/training/index.htm>
2. The individual is enrolled in the Animal Exposure Program (AEP) through the Occupational Medical Service (OMS).
 - a. If the individual being added to the ASP is a contractor, they are not eligible for enrollment in the AEP offered by OMS but must be enrolled in a similar program through their contracting company.

II. Addition of Personnel to an ASP (1st time)

A. The principal investigator (PI) wishing to add personnel to the list of individuals authorized to work on an ASP must submit an amendment. This amendment, in the form of a memo, must include the following information:

1. Individual's name
2. Degree
3. Affiliation (Summer student, IRTA, Contractor, etc.)
4. Level of supervision.

B. The amendment should also include a statement that the proposed personnel have completed the OACU course and are enrolled in the AEP, if eligible.

C. In addition to the amendment, a Training and Experience (T & E) form must be complete for the proposed personnel and must accompany the memo. A copy of this form can be found on the last page of this guideline.

B. The memo and the T & E form should be signed by the PI and be submitted to the NIMH Animal Care and Use Committee (ACUC) Coordinator Building 49, Room B1W16.

III. Addition of Personnel to a Subsequent ASP

A. The PI should complete the steps the same as II. A & B, the T & E form does not need to be submitted.

B. The following statement should be added to the memo:

I have read the final, approved version of this ASP and will limit my activities to performance of only those procedures described in the approved ASP. I understand my responsibilities for acquiring training on techniques I am asked to perform on animals as described in this ASP, but am not currently proficient in performing.

This statement is to be signed by the individual being added to the ASP.

- C. The memo should then be signed by the PI and be submitted to the NIMH Animal Care and Use Committee (ACUC) Coordinator Building 49, Room B1W16.

IV. Approval of the Amendment

- A. After confirmation of course attendance and AESP enrollment, the ACUC Chair will approve the amendment on behalf of the ACUC and approval of the amendment will be reported to the full Committee at the next monthly meeting.
- B. The ACUC Coordinator will fax an approved copy of the amendment and the T & E form (if applicable) to the appropriate animal housing facilities and to the PI.
- C. Some facilities may require additional training prior to allowing personnel access to the animal facility.
- D. Questions should be directed to the ACUC Coordinator at 301-402-0408.

NIMH Training and Experience Form

SECTION A: General Information

Name: _____ Phone No.: _____

Fax No.: _____ Bldg/Rm: _____ Email: _____

ASP#/Title: _____

PI Course completion dates: (Initial) _____ (Refresher) _____

AU Course completion dates: (Initial) _____ (Refresher) _____

Training Information

1) What is your experience or training for procedures you will be performing on this ASP (e.g. number of years working with the species and proficiency with techniques listed such as injections, blood collection, surgery, behavior tests, etc.)?

2) _____ [Name(s) of PI and/or designee] will provide supervision and training in the techniques I will be performing on this ASP until I am fully qualified to perform these animal activities independently.

3) **Yes/No:** This ASP involves Nonhuman Primates procedures. **If yes complete Section B. If no, go to Section C.**

SECTION B: Nonhuman Primate (NHP) Procedures

1) Nonhuman Primate Safety Course: (IC component date) _____
(Facility component. date(s): _____; _____; _____)

2) **Yes/No** There will be "awake" NHP procedures performed as a part of this protocol, e.g. squeezing up for injections, pole/collar, restraint chairs, operant procedures, etc. **If Yes – complete 3 and 4. If no, go to Section C.**

3) I will be performing the following awake NHP procedures: _____

4a) _____ I am currently proficient in performing all of the awake NHP procedures that I've listed above,
OR

4b) _____ [name(s) of PI or designee] will provide my supervision and training until I am fully qualified to perform these awake NHP procedures proficiently and independently.

SECTION C: Assurances

Yes / No: I have read or will read the final, approved version of this ASP and will limit my activities to performance of only those procedures described in the approved ASP.

Yes / No: I understand my responsibilities for acquiring training on techniques I am asked to perform on animals as described in this ASP, but am not currently proficient in performing. Additionally, if my support role for this ASP changes, I will submit a new T&E form and acquire training prior to performing any new procedures.

Animal User signature: _____ **Date:** _____

As the PI, I assume the responsibility to ensure that this Animal User's training and experience for procedures he/she will be performing under this ASP has been or will be assessed, and if this person is not proficient in performing these procedures, training will be provided, and proficiency verified, before the person is allowed to conduct these procedures independently.

Principal Investigator signature: _____ **Date:** _____