

**UNIVERSITY OF WINDSOR ANIMAL CARE COMMITTEE**

**FINAL REPORT**

Send **one electronic copy with all electronic signatures and dates** to the Animal Care Coordinator; at acc@uwindsor.ca.

**This form must be returned within 30 days of completion of the study.**

**Today’s Date:** Click here to enter text. **AUPP #** Click here to enter text.

**Original AUPP Approval Date:** Click here to enter text.

**End date for the project**: Click here to enter text.

**Project Title:** Click here to enter text.

**Principal Investigator/Instructor**: Click here to enter text.

**Department:** Click here to enter text. **Emergency Phone:** Click here to enter text.

**Email:** Click here to enter text.

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|  | **Name** | **Dept.** | **Emergency Phone** | **E-mail** |
| **Co-Investigator** | Enter text. | Enter text. | Enter text. | Enter text. |
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| **Student Researcher** | Enter text. | Enter text. | Enter text. | Enter text. |
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**Please fill in all the questions. If a question is not applicable to your project, enter N/A.**

**1a.** Briefly (in lay language, 150-250 words) describe the outcome of the research. Please include if any effort was made to replace, reduce or refine the use of animals in this protocol during the past year.

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**1b.** What were the endpoints of the protocol and were any problems encountered in achieving these? (Note: CCAC guidelines on choosing and administrating appropriate endpoints can be found at the following link “<https://www.ccac.ca/Documents/Standards/Guidelines/Appropriate_endpoint.pdf>”)

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**2.** What was the total number of animals of each species requested under this AUPP for the last 12-month period?

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| --- | --- |
| **Number** | **Species** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

**3.** What was the total number of animals of each species used under this AUPP during the last 12-month (renewal) period? If necessary, attach a separate sheet.

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| --- | --- |
|  **Number** | **Species** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

 **4.** Did any of the animals used during the last 12-month period or during the duration of this project experience any anticipated or unanticipated adverse reactions? [ ] Yes [ ] No

If **yes**, provide a brief description of the adverse reaction(s) and the course of action taken to alleviate any pain/suffering in the animals.

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**5**. Were any animals used in the last 12-month period housed in the University of Windsor’s Animal Care facilities? [ ] Yes [ ] No

If **yes**, please provide the numbers carried over from the previous year.

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**6.** During this same period, did any animals die from circumstances other than planned euthanasia?[ ] Yes [ ]  No

If **yes**, state how many died and provide a brief description of the circumstances.

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**7.** Were any changes made to this protocol during the last 12-month period or during the duration of this project**?**  [ ] Yes [ ] No

 If **yes**, indicate below what these were and provide a detailed explanation of these changes below. Attach a separate sheet if necessary.

 [ ] Species [ ] Total number of animals required

 [ ] Type and/or dose of analgesic [ ] Procedure(s)\*

[ ] Type and/or dose of anaesthetic [ ] Euthanasia methods

 [ ] Type and/or dose of other drugs [ ] Other

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**8.** If applicable, explain the reason for the difference in numbers reported in #2 and #3.

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**RESEARCHER’S/COURSE INSTRUCTOR’S DECLARATION**

**1**. I confirm that the Final Report accurately describes ALL the animal use in the original AUPP.

**2.** All animals in this project were used in compliance with the regulations of Ontario’s *Animals for Research Act*, the guidelines of the Canadian Council on Animal Care, and the policies and procedures of the University of Windsor.

**3**. I am aware that the data provided in this protocol will be entered into the Animal Research Protocol Management System and submitted to the Canadian Council on Animal Care.

**4**. I will ensure that any individual who performed any procedure(s) described in the AUPP and its renewals will be familiar with the contents of this document.

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**FOR THE OFFICE OF RESEARCH SERVICES USE ONLY**

This Final Report has been received and approved by the Animal Care Committee (ACC).

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ACC Chair Approval Date

Revised: April 2023