**Form B (per rule 8(a)\* for submission of Research Protocol (s)**

**Application for Permission for Animal Experiments**

Application to be submitted to the CPCSEA, New Delhi after approval of Institutional Animal Ethics

Committee (IAEC)

**Section – I**

|  |  |  |
| --- | --- | --- |
| 1. | Name and address of establishment | Pondicherry University, Pondicherry |
| 2. | Registration number and date of registration | Reg. No. 1159/GO/Re/S/08/CPCSEA  Dated : 31.02.2008 |
| 3. | Name, address and registration number  of breeder from which animals  acquired (or to be acquired) for  experiments mentioned in parts B & C |  |
| 4. | Place where the animals are presently  kept (or proposed to be kept). | Central Animal House Facility, Pondicherry University, Puducherry-605014 |
| 5. | Place where the experiment is to be  performed (Please provide CPCSEA  Reg. Number) | Central Animal House Facility, Pondicherry University, Puducherry-605014  Reg. No. 1159/GO/Re/S/08/CPCSEA |
| 6. | Date and Duration of experiment. |  |
| 7. | Type of research involved (Basic  Research / Educational/ Regulatory/  Contract Research) |  |

Signature:

Name and Designation of Investigator:

Date:

Place:

**Section – II**

**Protocol form for research proposals to be submitted to the Institutional Animal Ethics Committee/ CPCSEA, for new experiments or extensions of ongoing experiments using animals.**

1. Project / Dissertation / Thesis Title:

2. Principal Investigator **/** Research Scholar / Research Guide / Advisor

a. Name:

b. Designation:

c. Dept/Div/Lab:

d. Telephone No:

e. Experience:

1. List of names of all individuals authorized to conduct procedures under this proposal.

Co-guides

a. Name:

b. Address:

c. Experience:

4. Funding source / Proposed funding sources with complete address (Please attach the proof)

5. Duration of the animal experiment.

a. Date of initiation (Proposed):

b. Date of Completion (Proposed):

6. Describe details of study plan to justify the use of animals (Enclose Annexure)

7. Animals required

a. Species and Strain

b. Age and Weight

c. Gender

d. Number to be used (Year-wise breakups and total figures needed to be

given in tabular form)

e. Number of days each animal will be housed.

8. Rationale for animal usage

a. Why is animal usage necessary for these studies?

b. Whether similar study has been conducted on in vitro models? If yes,

describe the leading points to justify the requirement of animal

experiment.

c. Why are the particular species selected?

d. Why is the estimated number of animals essential?

e. Are similar experiments conducted in the past in your establishment?

f. If yes, justify why new experiment is required?

g. Have similar experiments been conducted by any other organization in

same or other in vivo models? If yes, enclose the reference.

9. Describe the procedures in detail:

a. Describe all invasive and potentially stressful non-invasive procedures that

animals will be subjected to in the course of the experiments)

b. Furnish details of injections schedule Substances:

Doses :

Sites :

Volumes :

c. Blood withdrawal Details:

Volumes :

Sites :

d. Radiation (dosage and schedules):

e. Nature of compound/Broad Classification of drug/NCE (the chemical

characteristic details of NCE and its likely reaction to the biological system and

characteristic details of invitro study of that NCE have to be submitted by the

establishment) :

10. Does the protocol prohibit use of anesthetic or analgesic for the conduct of

painful procedures? If yes, justify.

11. Will survival surgery be done?

If yes, the following to be described.

1. List and describe all surgical procedures (including methods of asepsis)
2. Names, qualifications and experience levels of personnel involved.
3. Describe post-operative care

d. Justify if major survival surgery is to be performed more than once on a

single animal.

12. Describe post-experimentation procedures.

a. Scope for Reuse :

b. Rehabilitation (Name and Address, where the animals are proposed to be

rehabilitated) :

c. Describe method of Euthanasia (If required in the protocol) :

d. Method of carcass disposal after euthanasia. :

13. Describe animal transportation methods if extra-institutional transport is

envisaged.

14. Use of hazardous agents (use of recombinant DNA-based agents or potential

human pathogens requires documented approval of the Institutional Biosafety

Committee (IBC). For each category, the agents and the biosafety level required,

appropriate therapeutic measures and the mode of disposal of contaminated food,

animal wastes and carcasses must be identified).

If, your project involved use of any of the below mentioned agent, attach copy of

the approval certificates of the respective agencies:

(a) Radionucleotides (AERB)

(b) Microorganisms / Biological infectious Agents (IBSC)

(c) Recombinant DNA (RCGM)

(d) Any other Hazardous Chemical / Drugs

**Investigator’s declaration.**

1. I certify that the research proposal submitted is not unnecessarily

duplicative of previously reported research.

2. I certify that, I am qualified and have experience in the

experimentation on animals.

3. For procedures listed under item 10, I certify that I have reviewed

the pertinent scientific literature and have found no valid alternative

to any procedure described herein which may cause less pain or

distress.

4. I will obtain approval from the IAEC/ CPCSEA before initiating

any changes in this study.

5. I certify that performance of experiment will be initiated only upon

review and approval of scientific intent by appropriate expert body

(Institutional Scientific Advisory Committee / funding agency /

other body).

6. I certify that I will submit appropriate certification of review and

concurrence for studies mentioned in point 14.

7. I shall maintain all the records as per format (Form D) and submit to

Institutional Animal Ethics Committee (IAEC).

8. I certify that, I will not initiate the study before approval from

IAEC/ CPCSEA received in writing. Further, I certify that I will

follow the recommendations of IAEC/ CPCSEA.

9. I certify that I will ensure the rehabilitation policies are adopted

(wherever required).

Signature :

Name of the Investigators:

Date:

**Certificate**

This is to certify that the project proposal no.**PU/CAHF/2025/31st IAEC/**  entitled \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_submitted by Dr./ Mr. / Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_has been approved/recommended by the IAEC of Pondicherry University in its meeting held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Number and Species of animals) have been sanctioned under this proposal for a duration of next \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorized by Name Signature Date**

Chairman: Prof. Prakash Babu

Member Secretary: Prof. Joseph Selvin

Main Nominee of CCSEA: Dr. V. Vasuki