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| **Research Personnel Training Record** |
| University of California, IrvineInstitutional Animal Care and Use CommitteeResearch personnel participating in activities with live animals require hands-on training of the procedures they will be performing with live animals. Documentation of this training ensures that anyone handling live animals is adequately trained to do so. One training record sheet should be maintained for EACH member of the study team to document the training they received related to their assigned activities with live animals. Submission of this form to the IACUC is NOT required. Please maintain these records within your lab. These records may be requested during facility inspections. |

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| **IACUC Protocol #:***(may list multiple protocols here)* |  |
| **Lead Researcher:** |  |

The following person has received the training listed below in order to perform animal research related activities here at UCI:

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| **Personnel Information** |
| Name: |  |
| UCI Email: |  |
| Hire Date: |  |
| Training Completion Date: |  |

| ***Required Initial Training*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *Personnel*  | *Supervisor* |
| Completed CITI Basic Training: Animal Care and Use and all required species- and procedure-specific modules |  |  |  |
| Complete/submit Lab Animal Occupational Health Program (LAOHP) screening questionnaire: (<http://www.research.uci.edu/ora/acup/healthprogram.htm>) |  |  |  |
| Added as personnel to protocol(s) via approved modification |  |  |  |
| Completed ULAR Classroom Training |  |  |  |
| Completed ULAR Vivarium Tour |  |  |  |
| Vivarium access key card acquired |  |  |  |
| Reviewed all animal-use protocols listed above |  |  |  |
| EH&S Training as recommended by the Safety Training Self-Assessment via UC Learning Ctr. (<http://www.uclc.uci.edu/>) |  |  |  |

*The following training categories can be customized to the specific needs of your lab (categories can be removed if not applicable to your study). To add new rows to the tables, place cursor at last cell on right and press “tab” key.*

| ***Non-Surgical Procedures*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *List procedures that will be performed in the lab, such as behavior testing, injections, gavage, animal monitoring, etc.* | *Personnel*  | *Supervisor* |
|  |  |  |  |
|  |  |  |  |

| ***Pre-Operative Procedures*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *Procedures associated with preparing animals for surgery, including anesthesia dosages and methods of administration, preparation of animals, etc.* | *Personnel*  | *Supervisor* |
|  |  |  |  |
|  |  |  |  |

| ***Surgery*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *Surgical procedures that will be performed on animals.* | *Personnel*  | *Supervisor* |
|  |  |  |  |
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| ***Post-Operative Monitoring & Animal Care*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *Post procedural monitoring tasks such as analgesic use, daily monitoring records, suture/staple removal, etc.* | *Personnel*  | *Supervisor* |
|  |  |  |  |
|  |  |  |  |

| ***Euthanasia*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *Method used for euthanizing animals, including physical method(s) for ensuring death, labeling carcasses prior to disposal, etc.* | *Personnel*  | *Supervisor* |
|  |  |  |  |
|  |  |  |  |

| ***Additional Procedures*** | *Date Completed* | *Verification Initials* |
| --- | --- | --- |
| *List any other procedures that are not captured in the categories above (may list administrative duties such as ordering animals, reporting animal numbers, etc. if you prefer).* | *Personnel*  | *Supervisor* |
|  |  |  |  |
|  |  |  |  |