

**PROTOCOL FOR ANIMAL USE AND CARE**  
(HERD/FLOCK/BREEDING COLONY)

EH&S USE ONLY
PROTOCOL # <u>  10162  </u>
EXPIRES: _____

- |   |   |                                      |        |
|---|---|--------------------------------------|--------|
| 1. Investigator   | Dept. Primate Center  | Phone:                               | e-mail |
| 2. Species: a. (Common names): Rhesus & Cynomolgus  |   | b. Estimated number per year: 500    |        |
| c. Source of animals: CRPRC   |   | d. Location of animal housing: CRPRC |        |
| 3. a. Title: CRPRC INDOOR TIME-MATE BREEDING  |   |                                      |        |
| b. Does this protocol replace a previously approved protocol?   | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | If yes, what number?                 | 8705   |
| 4. <b>Summary of Procedures:</b> Include in your description a statement about the procedures performed on the animals. (Please provide a list of standard SOP numbers in your description) |   |                                      |        |

**Animals will be provided with routine health care by the CRPRC Vet staff. Animals are observed daily by the animal care staff to check for problems.**

**Females are time-mated according to menstrual cycles. Females are placed in cages with male animals for approximately 2 hours each day as scheduled (up to three days per month).**

**Pregnancy detection's are done by the following methods:**

1. **Blood test – 2cc blood is drawn, maximum of twice per month (from cephalic vein using arm-pull technique).**
2. **2. Ultrasound – animals are immobilized with Ketamine (10 mg/kg IM) for ultrasound exams, maximum of twice per month.**

**Once pregnancy is confirmed, animals may be assigned to projects covered by other research protocols.**

5. Are the animals subjected to any procedures that are likely to cause more than slight, momentary pain or distress: (e.g. special agricultural practices like castration, dehorning, docking, beak or toe-trimming, dubbing, force molting, electroejaculation; identification by branding, toe-clipping, or ear-notching;.etc.)? yes  no
- If yes, please **attach** copies of the relevant portions of the SOPs for review by the animal care committee.
6. Describe the overall intent for maintaining the breeding animals.

**The purpose of this colony is to provide pregnant animals of known gestation age and infants for research. Any research performed on these animals will be covered by separate research protocols.**

Methods of euthanasia: Even if you do not intend to euthanize the animals, you should show a method that you would use in event of unanticipated injury or illness.

Species	Method
Primates	Overdose of Sodium Pentobarbitol (60 mg/kg IV)

8. Assurances for the Humane Care and Use of Vertebrate Animals: \_\_\_\_\_

Principal Investigator's Statement:

I have read and agree to abide by the UC Davis Policy and Procedure Manual section 290-30 (Animal Use and Care). This project will be conducted in accordance with the ILAR *Guide for the Care and Use of Laboratory Animals*, the *Guide for the Care and Use of Agricultural Animals in Agricultural Research and Teaching*, and the UC Davis Animal Welfare Assurance filed with the UC Public Health Service. (Copies of these documents are available from the Campus Veterinarian). I will abide by all Federal, state and local laws and regulations dealing with the use of animals in research.

I will advise the Animal Use and Care Administrative Advisory Committee in writing of any significant changes in the procedures of personnel involved in this project.

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*Principal Investigator* *Title/Rank* *Date*

Final Disposition of this protocol: Approved \_\_\_ Not Approved \_\_\_ Withdrawn by Investigator \_\_\_

Date of Action: \_\_\_/\_\_\_/\_\_\_