**PROTOCOL AMENDMENT FORM**

*Please send completed forms to iacuc@liberty.edu*

The Liberty University IACUC has developed this form to aid investigators with making modifications to approved animal use protocols. Please keep in mind the following:

1. Depending on the requested change(s), the IACUC may request that a new protocol be submitted for further evaluation.
2. For changes that require a new protocol, please submit a new protocol form along with this form for consideration.
3. **For changes in personnel (*other than the PI*), please use the personnel amendment form.**

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| **PROTOCOL INFORMATION** |
| Principal Investigator:       |
| IACUC Protocol #:       |
| Title of Protocol:       |

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| **CHANGES REQUIRING A NEW PROTOCOL** |
| [ ]  Change in the purpose, aim, or objectives of a study |
| [ ]  Change in Principal Investigator (*Also submit a Change in PI form to the IACUC*) |
| [ ]  Change or addition of a new species |
| [ ]  Large increase in animal number (*>100%*) |
| [ ]  Repeating an experiment with more animals |
| **SIGNIFICANT CHANGES** |
| [ ]  Adding hazardous agents |
| [ ]  Increasing the number of an already approved species (*>25% but ≤ 99% of the approved #*) |
| [ ]  Changing an approved procedure |
| [ ]  Adding or changing therapeutic/anesthetic agents |
| [ ]  Adding a new procedure (*may not cause additional pain or distress*) |
| [ ]  Changing the method of euthanasia |
| [ ]  Other:       |
| **MINOR CHANGES** |
| [ ]  Increasing the number of an already approved species (*>10% but ≤ 25% of the approved #*) |
| [ ]  Adding a new strain of the same species |
| [ ]  Removing a species |
| [ ]  Change in age of animals already approved for the study |
| [ ]  Change in administration of an already approved experiment or treatment as it relates to the timing, dose, route of administration, and/or specific chemical composition |
| [ ]  Change in animal use location or field site |
| [ ]  Other:       |
| **ADMINISTRATIVE CHANGES** |
| [ ]  Change in protocol title or funding source |
| [ ]  Change in address, phone number, or email address |
| [ ]  Increasing the number of an already approved species (*≤10% of the approved #, not “E”*) |
| [ ]  Other:       |
| **Change(s) to be made:**       |
| **Rationale for change(s) (be as thorough as possible):**      |
| **Will there be an increase in the number of animals?** [ ]  No [ ]  Yes *(complete chart below)* |
| Species | Number Originally Approved | Number To Be Added |
|       |       |       |
|       |       |       |
|       |       |       |
| *Any addition greater than 10% but less than or equal to 25% of the approved number will be reviewed by the Chair upon receipt of the amendment. An increase by more than 25% of an already approved species will be reviewed at the next convened IACUC meeting. Any addition beyond 100% of the original number will require a new protocol application.* |
| **Justification for additional animals (be as thorough as possible):**       |
| **CERTIFICATION** |
| [ ]  Certification (**Check the box if you agree to the terms below**)* I understand that the approval for inclusion of the above modification(s) into the approved protocol is granted solely by the IACUC and will continue for the current three year approval period.
* I understand that the approval for this change will continue to be effective upon annual renewal approval, or until the protocol is terminated.
* I understand that any changes in protocol must be approved prior to implementation.
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| **Today’s Date:**       | **Submit form to:** iacuc@liberty.edu |