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| SOUTH AUSTRALIAN ANIMAL ETHICS APPLICATION FOR A MINOR AMENDMENT  TO A CURRENT APPROVED PROJECT  ADDITIONAL ANIMALS/SPECIES CHANGE/PROCEDURE CHANGE |

Please do not use this form if you require University of Adelaide Animal Ethics Committee approval.

The University web form is accessible at the ethics website: <http://www.adelaide.edu.au/ethics/animal/guidelines/>

**To which committees are you submitting? Email completed form to:**

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| --- | --- |
| Flinders AWC: School of Biological Sciences | [awsc@flinders.edu.au](mailto:awsc@flinders.edu.au) |
| Flinders AWC: School of Medicine | [aersc@flinders.edu.au](mailto:aersc@flinders.edu.au) |
| PIRSA/SARDI | PIRSA.AnimalEthics@sa.gov.au |
| SAHMRI | secretary.aec@sahmri.com |
| University of South Australia | [animalethics@unisa.edu.au](mailto:animalethics@unisa.edu.au) |
| Wildlife | [DEW.WildlifeEthicsCommittee@sa.gov.au](mailto:DEW.WildlifeEthicsCommittee@sa.gov.au) |

Instructions

* After completing this form please refer to the relevant Animal Ethics Committee for the preferred method of submission via Word or pdf.

The Minor amendment of a Protocol does not involve a change in the main aims of the project or the asking of a new scientific question.

**Please indicate the amendments requested:**

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|  | A. Extension of time of existing approved project. |
|  | B. Modification to procedures in previously approved project. |
|  | C. Change to Animals required (number, species, strain etc) |
|  | D. Change of Investigator or Other Personnel |

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| **AEC Project Number:** |  | | **Approval period including Existing Expiry Date:** |  |
| **TITLE OF PROJECT:** | | | | |
| Name of Primary Applicant | |  | | |
| Applicants Institution and Department | |  | | |
| Email address: | |  | | |
| Telephone: | |  | | |
| Contact person for this application (if not the Chief Investigator or Alternate Chief Investigator).  Title/first name/last name | |  | | |
| Email address: | |  | | |
| Telephone: | |  | | |
| Approval to share information | | By submitting this application I give approval for this application and any information relating to it to be shared by South Australian Animal Ethics Committees and the Animal Welfare Unit within the Department for Environment and Water for the purposes of administration, approval and monitoring.  Yes | | |
| Declaration of interest | | Is there any actual or potential interest, including financial interest or other relationship or affiliation by any research/team member involved in the project that may affect judgements and decision regarding the wellbeing of the animals involved? See Code [Clause 2.7.4](http://www.nhmrc.gov.au/book/australian-code-practice-care-and-use-animals-scientific-purposes/2-7-responsibilities#2.7.4) [xxi]  Yes  No  If yes, outline the potential and any steps to be taken to ensure the ethical integrity of the project. | | |

Animal Use previously approved

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| --- | --- | --- | --- | --- | --- |
| *Species/Strain* | *Sex* | *Age/Size* | *Original Number of Animals Approved* | *Additional Animals Previously Requested and Approved* | *Number Used to Date* |
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SECTION A. Is an extension of time to complete this project requested?

Yes  No

If you mark “No” go to Section B.

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| 1.1 Has an extension of time previously been requested and approved? |  |
| 1.2 Requested finish date: |  |
| 1.3 Reason for extension: |  |

SECTION B. Is a modification to the procedures in this project requested?

Make sure this application describes what the old procedure and the new procedure is so that the reader does not have to refer to the original application to understand what is being asked.

Yes  No

If you mark “No” go to Section C.

*Use PLAIN ENGLISH* in your response to the following sections – everyday language that can be understood by an educated lay person who has no medical or scientific background.

Do not use scientific jargon and avoid using acronyms.

2.1 Please give a brief lay description of the original project, its aims and progress to date.

2.2 Brief lay description of the modification. Give a one sentence/phrase description of each proposed amendment.

2.3 Detailed description.

2.3.1 Provide a description of the proposed modification and indicated how it will fit within the currently approved project.

2.3.2 Explain the scientific merit of your requested change.

2.3.3 State the welfare impact of the changes on the animals and how that impact will be minimised.

2.3.4 Will this modification require approvals from other AECs, committees or authorities?

Yes  No

Explain and provide details of additional approvals required/obtained.

2.3.5 Has the Pain Classification changed?

Yes  No

If yes, indicate the change.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Category** | **Procedures** | **Extent and Duration Suffering** |
|  | No pain or distress |  |  |
|  | Mild pain or distress |  |  |
|  | Moderate pain or distress |  |  |
|  | Substantial pain or distress |  |  |
|  | Severe pain or distress (Animals in this category must be humanely killed) |  |  |

2.3.6 Has the Procedure Category changed? If so, what will the new category be? Please comment on the change.

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|  | Observational Studies: e.g. behavioural study, feeding trial, pitfall trapping, obtaining weights and body measurements. |
|  | Animal Unconscious; No Recovery: Animal killed prior to commencement of project or killed while under general anaesthetic e.g. killing animals for voucher specimens. |
|  | Minor Conscious Intervention: No Anaesthesia: e.g. injections, leg-banding, blood sampling, fitting radio-collars, attaching transmitters with glue or tape, toe or ear clipping for identification purposes, implanting microchips without anaesthesia. |
|  | Minor Procedures with Recovery: e.g. Organ biopsies, attaching radio-collars or transmitters under anaesthesia, implanting microchips under anaesthesia, removing teeth, micro CT. |
|  | Major Surgery with Recovery: e.g. bone surgery, implanting abdominal radio-transmitters. |
|  | Minor Physiological Challenge: e.g. minor infection, minor or moderate genetic deformity, early oncogenesis; residue testing. |
|  | Major Physiological Challenge: e.g. major infection, oncogenesis without pain alleviation; environmental deprivation for extended periods. |
|  | Death as an Endpoint: e.g. lethality testing, vaccine testing where death is a planned and necessary part of the study (see Code definition and clause 1.13). |

2.3.7 Monitoring. Will animals be monitored as outlined in the currently approved protocol?

Yes  No

If NO, provide details of the new monitoring requirements and attach an amended or additional monitoring checklist if appropriate.

SECTION C. Are Additional Animals or Change of Species/Strain required?

If yes, please refer to the relevant Institutional Guidelines relating to the maximum number of animals that may be requested prior to completing the section below. This will help you determine whether or not a new protocol application is required.

Yes  No

If you mark “No” go to Section D.

**3.1** **Additional Animals/Change of Species Requested**

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| --- | --- |
|  | Additional animals |
|  | Change of species/strain |
|  | Additional species/strain |

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| --- | --- | --- | --- |
| *Species/Strain* | *Sex* | *Age/Size* | *Number Requested* |
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**3.2 Provide justification for this request.**

SECTION D. Change of Investigator or Other Personnel

Yes  No

If you mark “No” go to Section E.

*Reminder: If the Chief Investigator leaves the project, an application for a new project may need to be submitted to the AEC. Contact the AEC Secretary for further advice.*

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| **Modification** | **Investigator/s name/s** | **Effective date/s** |
| (i) Investigator/s leaving project |  |  |
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(ii) New investigator/s on project

*For each new person involved with the use of animals in this project outline their level of experience in the use of the proposed techniques and procedures, in handling the selected animal species and the experimental steps in which they will be involved, plus with the date on which they attended Animal Welfare Day/Training Course.*

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|  | Name and Qualification | Detail the experience each participant has in the procedures to be undertaken with the species being used (if no experience, describe how relevant training and supervision will be obtained | In which  procedure(s) is this person involved? | Date this  person  attended an  Animal Users  Training Day? |
| **Investigator(s)** |  |  |  |  |
| Other People Participating |  |  |  |  |

SECTION E. Investigator Declaration of Responsibilities

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| I have reviewed the particulars set out on the *original* Application to the AEC for this project and certify: | |
| (i) That the Aims of the project are unchanged. | Yes  No |
| (ii) That any licences or permits that are required have been obtained and are current. | Yes  No |
| (iii) That the “Purpose” classification of the project is unchanged. | Yes  No |
| (iv) That the “Procedure” classification of the project is unchanged. | Yes  No |
| Except where this is discussed in the Minor Amendment Application.  (Note: **Where the answer is NO,** please review your application.  The submission of a new Application may be required.) |  |

I hereby declare that:

i) I and all others involved in this project are familiar with and will comply with the relevant Commonwealth and State or Territory legislation and the requirements of the [Australian Code of Practice for the care and use of animals for scientific purposes, 8th Edition 2013](http://www.nhmrc.gov.au/book/australian-code-practice-care-and-use-animals-scientific-purposes) (The Code)

(ii) To the best of my knowledge this proposal conforms to the Code (8th Edition 2013) and the South Australian *Animal Welfare Act 1985.*

(iii) I have read [Section 2 of the Code](http://www.nhmrc.gov.au/book/australian-code-practice-care-and-use-animals-scientific-purposes/section-2-responsibilities) which sets down the responsibilities of investigators. I accept responsibility for the conduct of all procedures detailed in this application and for the supervision of all personnel delegated to perform any such procedures.

(iv) I agree to comply with procedures described and any conditions imposed by the Animal Ethics Committee.

(v) Sufficient and adequate resources will be available to undertake the proposed study.

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| Primary Applicant's Name | Primary Applicant's Signature | Date |
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| Other Applicant's Name | Other Applicant's Signature | Date |
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| **AEC Use Only** | | |
| Date Received: | Action Taken:  Date of AEC meeting for consideration: | Signature of Chair, AEC |