

## Montana State University (MSU) Animal Care Plan Questionnaire

To determine if your project needs and institutional review of animal health and care procedures for vertebrate animals (e.g., cows, sheep, wildlife, fish, etc.), please complete this questionnaire. Additional page may be used.

**MSU PI Name:**

**Applicant Entity Name:**

**Applicant PI Name:**

**Project Title:**

**Project Start Date:**

**Project End Date:**

1. Please indicate what kind of animals will be involved in your project.
2. Please indicate how many of each animal will be involved in your project.
3. Will you be using money from this award to purchase animals? Y N
  - a. If yes, please indicate the source (name and location) from which you plan to obtain animals for your project.
4. If animals are transported off-site, please describe how they will be transported.
5. What is the stocking density (space per animal)? Please provide a response for all forms of housing (pens, feedlots, pastures, etc.) that will be used in this project.
6. Will this project require use of confinement production? Y N
  - a. If Yes, describe housing for normal and inclement weather and note how often the shelters will be cleaned.
  - b. If Yes, indicate how feed and water are provided and how often it is checked
7. Does your project involve range or pasture production? Y N
  - a. If Yes, will animals have access to reliable water sources during the trial period? Y N
  - b. If Yes, indicate how often will the water source/s be checked.
8. Does this project call for reduced dietary intake or quality? Y N
  - a. If Yes, describe how long will the period last and describe the recovery protocol for the subject animals.

*Continues next page*

*If awarded, awardee agrees to work with the Office of Research Compliance at Montana State University to complete animal oversight requirements.*

## Animal Care Plan Questionnaire

9. Describe the vaccination program and the routine biosecurity procedures used to minimize disease and other issues. Include what the animals are vaccinated against and provide common names of the products used; for example description of routine deworming, parasite control, and new arrival introduction.
  
10. What procedures will the animals undergo during the course of this project?
  
11. Will the procedures induce or potentially induce distress or pain in the animals? Y      N
  - a. If Yes, how will you manage or minimize the potential for pain and distress?
  
12. Please indicate your training or expertise with animal care.
  
13. Will other individuals participate in the care or handling of the animals associated with this project? Y      N
  - a. If yes, describe their expertise with animal care.
  
  - b. If individuals need to be trained to perform the procedures described in this project, please indicate how they will be trained to do the procedures properly.
  
14. At the end of the project, what happens to the animals? Please indicate if they will remain at the project site, be sold, euthanized or be slaughtered.
  - a. If animals will be slaughtered, please indicate if this will occur at a commercially licensed slaughter facility. If it is not done at a commercially licensed slaughter facility, describe where and how slaughter will be conducted.
  
  - b. If carcass disposal has the potential to negatively affect other animals, or wildlife (e.g., carcass tainted hormones, drugs, sedatives, etc.), describe how the carcass will be disposed of.
  
15. Will the animals or products from these animals be used as food for human consumption? Y      N
  - a. If Yes, confirm that withdrawal times for medications will be followed before allowing the animals or products from the animals to enter the food chain.
  
16. Identify the veterinarian (name, address, and contact information) who will provide routine and emergency care of the animals used in this project.
  
17. Do you have access to an animal care review board, e.g.(Institutional Animal Care & Use Committee, IACUC)?  
Y      N      If yes, please indicate the institution and board:

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