

# Office of Laboratory Animal resources Animal Import Form PLEASE READ ALL INFORMATION AND SIGN BELOW

#### PROCUREMENT:

- All animal procurements/acquisitions from non-commercial or unapproved sources are required to go through OLAR's import processing.
- Quarantine space is limited. Imports will be processed in the order of approval completion. Hence, imports may be delayed.
- Multiple shipments from the same institution or farm are considered separate transfers and approval is needed each time.

### QUARANTINE:

- Rodents will be housed in quarantine for at least 6 weeks. Upon arrival, colony animals will be swabbed for fur mites and
  fecal samples collected for pinworm and Helicobacter status. Sentinels will be housed separately and exposed to dirty
  bedding from the cages of imported colony animals. At the end of the 4th week of dirty bedding exposure, blood samples
  will be taken from sentinel animals for serology testing. An extension of the quarantine period and/or additional quarantine
  testing might be necessary.
- If animals test positive for pathogens during quarantine, one (or more) of the following courses of action are possible at the discretion of OLAR (depending on the infectious agent(s) involved):
  - The entire shipment of animals will be euthanized.
  - The quarantine period may be extended with additional testing.
  - A treatment plan may be used for bacterial, fungal, parasitic agents, or other pathogens.
  - The colony may be rederived.
- Animals will be housed in a yellow status (Helicobacter/ MNV positive) room unless specifically approved by the veterinary staff prior to import. If these pathogens will influence your study, options are available to clear animals of these pathogens, such as the use of rederivation.
- Animals may be treated with an anthelmintic during the quarantine period to treat for parasites. This may delay their release.
- Breeding or other experimental manipulation of animals in quarantine is not allowed, unless specifically approved by the IACUC or veterinary staff.

### **CHARGES**

• The importing PI is responsible for all charges, including testing, shipping, per diem, sentinels, special care, administrative time, etc. Estimates are provided upon request.

#### PRE-APPROVAL PROCESS

- You must have and approved WVU ACUC protocol with the requested species and strain listed.
  - You must have an MTA (Material Transfer Agreement) in place.
    - Contact <u>commercialize@mail.wvu.edu</u> to start your MTA.
- This completed OLAR import form should be submitted 30 days prior to the requested import arrival date.

### APPROVAL PROCESS

 OLAR veterinarian reviews colony health surveillance reports from unapproved sources for approval or denial of desired import animals.

### Please sign below to agree that you have read and agree to this document.

| Signature: | Date: |
|------------|-------|
|            |       |



### Type of request

- Acute Use: Animals will go directly to a non-housing area and are euthanized within 12 hours.
- **Quarantine**: Animals arrive and are placed into quarantine to be incorporated into colony.

### **Part 1: Requestor Information**

| Principal Investigator: | Department:     | ACUC protocol number: |
|-------------------------|-----------------|-----------------------|
|                         |                 |                       |
|                         |                 |                       |
|                         |                 |                       |
| Telephone #:            | E-mail address: |                       |
|                         |                 |                       |
|                         |                 |                       |
|                         |                 |                       |

## Ordering Person's Information (if different than above)

| Name:        | Department:     | ACUC protocol number: |
|--------------|-----------------|-----------------------|
|              |                 |                       |
|              |                 |                       |
|              |                 |                       |
| Telephone #: | E-mail address: |                       |
|              |                 |                       |
|              |                 |                       |
|              |                 |                       |

### Part 2 Institution from which animal will be obtained.

| Institution:                  |              |                 |
|-------------------------------|--------------|-----------------|
| Sending Investigator:         | Telephone #: | E-mail address: |
| Other contact:                | Telephone #: | E-mail address: |
| Veterinarian's Name           | Telephone #: | E-mail address: |
| Import/Export<br>Coordinator: | Telephone #: | E-mail address: |
|                               |              |                 |



# Part 3: Description of animals (attach a separate sheet for each strain)

| Species:   | Strain/genotype:                                   |  |
|--|--|--|
|  |  |  |
| Total number of animals to be imported:  | Numbers by gender                                  |  |
|  | Male: Female:                                      |  |
| Immune Status (check one):   | Any special Conditions:                            |  |
| Immune competent   |  |  |
|  |  |  |
| Reason for importation   | Any known clinical conditions:                     |  |
| Incorporation into resident colony   |  |  |
| 🗆 Immediate euthanasia   |  |  |
| Other:   |  |  |
| Desired date of arrival:   | Proposed housing location after quarantine period: |  |
|  |  |  |
|  |  |  |
| If quarantine results are positive for excluded pathogenic agents, please choose from the following: |  |  |
| Euthanize all animal assigned to this quarantine lot.  |  |  |
| Rederive the animal commercially.  |  |  |
| Treat and re-test after extended quarantine.   |  |  |
|  |  |  |

### □ Not applicable (please attach addition notes if necessary)

## DO NOT write in this box, of OLAR use only.

| Date Received:            | Received by:                                     |
|---------------------------|--|
| OLAR quarantine ID #:     | Protocol verification:                           |
| Health reports requested  | Health reports received:                         |
| Import:  approved  denied | By:  |
| Date arrived:             | Quarantine testing:  Passed  Fail Released on to |
| Notes:                    |  |
|                           |  |
|                           |  |
|                           |  |
|                           |  |
|                           |  |