All necessary documents must be submitted to iacuc@georgiaaquarium.org as PDFs once completed. Hard copies, scanned hard copies, and faxed copies of applications will not be accepted.

**SECTION P. AMENDMENTS**

**P1. PROTOCOL INFORMATION**

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| Protocol Title: |       |
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| Principal Investigator: |       | Protocol ID: |       |
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**P2. SECTIONS BEING AMENDED**

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| What section(s) do you want to amend? (select all that apply) |
| **[ ]**  Section A-F: Core **(see below)****[ ]**  Section G: Personnel Qualifications **[ ]**  Section H: Hazard Use**[ ]**  Section I: Survival Surgery**[ ]**  Section J: Non-Surgical | **[ ]**  Section K: Field Study **[ ]**  Section L: Emergency Care Instructions**[ ]**  Section M: Specimen or Data Request**[ ]**  Section N: Exemption from AWRs**[ ]**  Section O: Aquatics, Amphibians, and Reptiles |
|  |  |
| For requests to amend Section A-F: Core, please specify the subsection(s): (select all that apply) |
| **[ ]**  A1: Personnel Information **[ ]**  A2: Emergency Contacts **[ ]**  A3: Study Type**[ ]**  A4: Role Delineation**[ ]**  A5: Collaborating Institutions **[ ]**  A6: Renewal Protocols**[ ]**  A7: Supplemental Sections**[ ]**  B1: Purpose & Scientific Benefit **[ ]**  B2: Literature Search **[ ]**  B3: Location of Records**[ ]**  B4: Species Justification**[ ]**  B5: Animal Numbers**[ ]**  B6: Experimental Design**[ ]**  B7: Number Justification**[ ]**  B8: Animal Identification  | **[ ]**  B9: Animal Use for Personnel Training**[ ]**  B10: Test Substances**[ ]**  B11: Grades of Chemicals**[ ]**  B12: Photographs & Videos**[ ]**  C1: Housing **[ ]**  C2: Special Husbandry Requirements**[ ]**  D1: Exemption from AWRs**[ ]**  D2: Controlled Substance Use**[ ]**  D3: Physical Restraint **[ ]**  D4: Withholding Pain Relieving Drugs**[ ]**  D5: Endpoints**[ ]**  E1: Euthanasia**[ ]**  E2: Final Disposition**[ ]**  E3: Sharing of Tissues, Fluids, or Carcasses**[ ]**  F: Principal Investigator Agreement |
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**P3. DESCRIPTION OF CHANGES**

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| Please copy and paste the original verbiage from the approved protocol that you would like to change: |
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| Describe below what changes you would like to make: |
|  |       |
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| These changes qualify as (see below): **[ ]** Minor **[ ]** Significant **Significant changes must also be included as a new protocol submission with the changes highlighted after converting to a PDF.** |
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**P4. AGREEMENT TO TERMS AND CONDITIONS**

I understand that protocol amendments cannot be implemented until approval is granted by the IACUC.

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| Principal Investigator Name: |  | Principal Investigator Signature:  |
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| Date: |  |
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Examples of **minor amendments** include, but are not limited to:

* Substitution in personnel (other than the PI)
* Small increase in the number of animals (<10%)
* Additional sample collection (non-surgical procedure)
* Addition of non-invasive, non-surgical procedures
* Addition of drugs or treatments use to ameliorate pain or suffering from complications associated with an approved surgery/procedure

Examples of **significant changes** include, but are not limited to:

* Objectives of the study.
* Addition of minor or major surgery.
* Change in species used or addition of a USDA regulated species.
* From non-survival to survival surgeries/procedures and vice versa.
* Resulting in greater discomfort or in a greater degree of invasiveness.
* Species or in approximate number of animals used (> 10%).
* Changes in drugs used or methods for anesthesia, analgesia, or euthanasia, including to add or withhold.
* Duration, frequency, or number of procedures performed on one animal.
* Need to repeat an experiment utilizing more animals.
* Addition of procedures with the potential to cause pain or distress.
* Addition of procedures that may result in unexpected death or other complications not described in original protocol or change the endpoint to death.
* Changes that would render immune competent animals immunocompromised.
* Change to a location where all or part of the study will be done.
* Addition of prolonged restraint procedure.