**GAQ IACUC UNANTICIPATED EVENT REPORT FORM**

This form must be completed by Principal Investigators and submitted as a **Word** document to Georgia Aquarium’s IACUC at [iacuc@georgiaaquarium.org](mailto:iacuc@georgiaaquarium.org) within **48 hours** of any unanticipated event that occurs during research. Whereby an “unanticipated event” is defined as any deviation from an approved protocol; any actions that result in negative impacts to animal welfare; or deviations from the Animal Welfare Regulations, Animal Welfare Act, or professional animal welfare standards.

**Protocol Information**\*

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| --- | --- | --- | --- |
| Report Date:\* | → Response Here | Reporting Party:\* | → Response Here |
|  |  |  |  |
| Principal Investigator:\* | → Response Here | Protocol #:\* | → Response Here |

**Event Description**\*

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date/Time:\* | → Response Here | Species:\* | → Response Here | | | | | | | |
|  | | | | | | | | | | |
| Location:\* | → Response Here | Total # animals:\* | # |  |  | Wild |  | GAQ Collection |  | Other |

1. **Incident narrative:** Detailed explanation of the situation (including what happened and what methodology was being used at the time of the incident.\*

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| → Response Here |

1. **Corrective action plan:** Briefly describe any self-corrective actions taken to minimize similar future occurrences.\*

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| → Response Here |

1. Name and role of individuals involved in the incident (e.g., principal or co-principal investigator, technician, animal caretaker, student, veterinarian, etc.):\*

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| → Response Here |

1. **Notification to veterinarian and/or IACUC or other:** Briefly describe who was notified of the incident and when.\*

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| → Response Here |

-------------------------------------------------------------------- STOP HERE--------------------------------------------------------------------

*For IACUC Administration Team Use Only*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date of IACUC Closure\* | → Response Here | Report Type\* | | |  | Self | |  | | | Veterinary | | | |  | | Third Party | | |
|  |  |  | | | | |  | | |  | | |  |  | | | |  |  | | |
| Date of Regulatory Closure\* | → Response Here | Prior History of Event\* | | | | |  | | | Yes | | |  | No | | | |  |  | | |
|  |  |  | | | | |  | | |  | | |  |  | | | |  |  | | |
| Is the incident anticipated in the protocol? | |  | Yes |  | No | | | |  | | |  | | | |
|  | |  |  |  |  | | | |  | | |  | | | |
| If so, list the sections and language: | | → Response Here | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | |
| **Additional Information:** Summary of additional information gathered/clarified: | | | | | | | | | | | | | | | | | | | | |
| → Response Here | | | | | | | | | | | | | | | | | | | | |

**IACUC Meeting**\*

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| --- | --- | --- | --- |
| Date of IACUC Meeting\* | | → Response Here | |
|  | |  |  | |  | |
| IACUC Determination:\* | |  |  | |  | |
|  | |  |  | |  | |
|  | More information needed, tabled to next meeting | | | Scheduled Date: | | → Response Here | |
|  |  | | |  | |  | |
|  | Email response to the Principal Investigator | | | Date: | | → Response Here | |
|  |  | | |  | |  | |
|  | Letter to Principal Investigator | | | Date: | | → Response Here | |
|  |  | | |  | |  | |
|  | Report to USDA and/or AZA | | | Date: | | → Response Here | |

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| **Additional Corrective Actions:** Summary of additional IACUC actions or requirements. |
|  |
| → Response Here |

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| **Additional Notes:** |
|  |
| → Response Here |