

ANIMAL ETHICS COMMITTEE OF THE UFS	GENERAL INFORMATION	PRINCIPLE INVESTIGATOR AND SUPERVISOR - REMEMBER TO ADD YOUR SUPERVISOR (IF APPLICABLE) HERE AND SELECT THE ROLE							
INVESTIGATORS INFORMATION	EXTERNAL PARTICIPANTS	PROJECT INFO	EXPERIMENTAL DESIGN	SPECIES	ANIMAL CARE	LOCATION	DOCUMENTS	SPONSOR	SPONSOR DETAILS
STATEMENT AND DECLARATION	ALL PAGES								

ANIMAL ETHICS COMMITTEE OF THE UFS



[Guidelines to complete this form](#)

1. All sections must be completed and all information must be included in the eform
2. The application must be brief, providing adequate information for expert review but also be understandable to lay persons, according to [SOP AEC 007 Submission of Protocols AEC accepted](#)
3. The application should be submitted before deadline dates.
4. Remember to 'SAVE' after each section and to click on the 'COMPLETE' box when all the fields are completed.
5. Submit the form when all the information is complete.
6. ? Question mark , next to the question give additional info. Please click on the ? Question mark, to see the info.

YOU NEED TO COMPLETE ALL SECTIONS TO BE ABLE TO SUBMIT THE APPLICATION. INFO: RIMS@ufs.ac.za; 051 401 9398 / 3682 / 9451 / 3942

[Templates for documents that you may need to upload to this application:](#)

[Wellfare Monitoring Sheet](#)

[Scientific Review Statement](#)

GENERAL INFORMATION

IMPORTANT NOTICE

* Principal Investigator Details

Mashamba, Mpho ML

Full Name Mashamba, Mpho ML

Email MashambaML@ufs.ac.za

Department Research Development Department (Bloemfontein Campus)

Phone 0514019398

If, your application has to be reviewed by another Ethics Committee, HSREC, GHREC, EBREC, please remember to also apply with the necessary Committee

Please make sure that the PRINCIPAL INVESTIGATOR'S department is NOT displaying as "RESEARCH DEVELOPMENT" above

Are all of the PRINCIPAL INVESTIGATOR'S details (email address, department, Personnel/Student ID and telephone number) above correct?

Yes No

Please complete all sections in the E-Form before submitting.

Animal Experiment Nr.

UFS-AED2019/0125

Date Received:

17-Jul-2019

* **Project title:**

Animal Ethics

* **Include evidence of scientific review. Upload here**

* **Will any veterinarian from outside UFS (who is NOT employed by the University of the Free State) be involved or be responsible for any aspects of this study?**

Yes No

* **Upload a signed declaration from the veterinarian:**

* **Will you be working with any live vertebrates or higher invertebrates?** Yes No

Keywords

* Please select keywords from this list that can be attributed to your study. (You can select more than one. Click on "SAVE" in the left menu. to see all the selected keywords)

Any other applicable Keywords (Not listed)

* Were you able to find all the keywords in the keyword list? Yes No

PRINCIPLE INVESTIGATOR AND SUPERVISOR - REMEMBER TO ADD YOUR SUPERVISOR (IF APPLICABLE) HERE AND SELECT THE ROLE

▼ **Personnel**

Name

Mashamba, Mpho ML

Role

PI

Certifications

Certification	Begin	End
-	-	-

INVESTIGATORS INFORMATION

Occupational Health and Safety

* Are there any aspects regarding the health and safety of participants that must be considered, for example chemicals and/or drugs to be handled by participants or zoonosis? Yes No

Add UFS participants [\(Click on the blue Add link to add Participants\)](#)

* Name
* Position
* Department
* Contact Number
Email Address
* Can be contacted after hours?
Duties/Procedures to be performed on the animal (tick all that apply)
* Specify if "other" procedure was chosen
Specify the duties/procedures further if necessary:
* State appropriate training and experience in such procedures and duties
* Registered with/Authorised by:
* Specify "other":
* Registration/Authorisation Number
* Upload a signed letter/declaration confirming participation

EXTERNAL PARTICIPANTS

Please select below:

* Are there any external people (not from UFS) who are participating in this project? Yes No

PROJECT INFO

Please complete the section below:

* Category: Click on the icon and select the applicable category * **Select type of Research**

Select the applicable purpose of the study regarding the use of animals

- Experiments on embryonated eggs or cephalopods and decapods
- Studies on vertebrate animals during the course of routine examination, sampling, procedures and treatment
- Experiments on vertebrate species that are expected to produce or no discomfort
- Experiments that involve minor stress or pain(short-duration pain) to vertebrate species
- Experiments that involve significant but unavoidable stress or pain to vertebrate species
- Procedures that involve inflicting severe pain at, or above the pain tolerance threshold of unanaesthetised, conscious animals

* **Background and Objective (maximum 200 words):**

* **Aim (maximum 200 words):**

* **Potential benefits of the research findings vs the harm of the animals**

Justification for the use of live sentient animals in this study:

* **Upload research proposal / protocol**

When will data be gathered from animal subjects?:

* **Date of Commencement of data gathering (ddmmyyy):** * **Date of Completion of data gathering (ddmmyyy):**

How long is the duration of the project?: *(The maximum continuous period that will be allocated to projects is twelve months. Renewals, extensions and amendment of existing projects must be submitted for approval.)*

* **Duration** * **Select (hours/days/weeks/months)**

* **Is this study a repetition of previous work (applicant/others)?** Yes No

* **If yes, motivate why another study is needed?**

Does the Study require the use of Radio Isotopes? Yes No

If yes, the approval of the radio isotope control committee must be appended.

EXPERIMENTAL DESIGN

Explanation of experimental design.

Fill in all applicable sections below. Kindly explain abbreviations eg. FCR in brackets only once, when it is mentioned in the application form and protocol)

Ensure that the following are included where applicable: (ALL PERSONS PERFORMING PROCEDURES MUST BE SAVC REGISTERED/AUTHORISED AND LISTED AS PARTICIPANTS)

1. Description of the methods used with special focus on procedures to which animals will be subjected:

2. Experimental outlay. Motivate from a bio-statistical viewpoint. Sample size must be justified by a statistical power analysis.

Upload a letter from a bio-statistician here:

3. The type of data expected.

4. Methods for processing and analysing the data with special focus on the statistical treatment of data.

5. Details and motivation of anaesthesia, analgesia and post-treatment recovery and care.

6. Details and motivation of medication used and for what purpose.

7. Details and motivation of trapping/capturing of wild animals.

8. Details of housing and routine care.

9. Describe the method of confirming death. (Death must be confirmed in all animals, prior to disposal)

10. Animal Wellbeing.

11. Animal Monitoring:

12. Explain how the Replacement of animals has been addressed in your protocol:

13. Explain how the Reduction of animals has been addressed in your protocol:

14. Explain how the Refinement of animals has been addressed in your protocol:

15. Explain how the Reuse of animals has been addressed in your protocol:

16. Explain how the Rehabilitation or Rehoming of animals has been addressed in your protocol:

17. Lay Terms Summary.

SPECIES

▼ Species

ANIMAL CARE

Stress and discomfort severity categories definitions:

Category A (none): Experiments on sentient animals that are expected to produce no discomfort, pain, suffering, distress or lasting harm.

Category B (mild): Experiments on sentient animals species expected to produce only mild discomfort. eg. single blood sampling, injections, anaesthetics, or procedures on anaesthetised animals that do not regain consciousness.

Category C (Moderate): Experiments that involve some discomfort to sentient animals, eg. surgical procedures under anaesthesia, or repeated dosing/injections/sampling over time.

Category D (severe): Experiments that involve significant stress or discomfort to sentient animals.

Procedures

* Select all the applicable procedures for the study:
* Specify "other"
* Select the severity category for this procedure:

List all scheduled drugs (registered under the *Medicines and Related Substances Control Act*) to be administered [\(Click on the blue Add link to add drugs\)](#)

* Name:
* Route of Administration:
* Dose:
* Frequency:
* Person administering the substance:
* Intended use:
* Specify if 'other':
* Schedule:

List all non-scheduled drugs (*vaccines, biological/chemical compounds, hormones, growth factors etc.*) to be administered [\(Click on the blue Add link to add drugs\)](#)

* Name:
* Route of Administration:
* Dose:
* Frequency:
* Person administering the substance:
* Intended use:
* Specify if 'other':

Legally responsible persons

- * Who is the person legally responsible for the safekeeping and maintaining of the drug register?
- * Who is the person legally responsible for prescribing and directing the administration of the medical substances and controlled substances in this study?

Euthanasia

- * Will any form of euthanasia other than any drug/s indicated in the section above be utilized? Yes No
- * Will euthanasia be utilized upon completion of your study? Yes No
- * Will Euthanasia be utilized during the study? Yes No

Method of confirming death (must be done prior to disposal):

LOCATION

LOCATION OF RESEARCH FACILITY [\(Click on the blue Add link to add location/s\)](#)

* **Conducted where? (Indicate the place where this experimental / training procedure will be conducted. eg. Paradys Experimental Farm, sheep intensive crate unit, animal unit)**

Other location/s not mention above: Name other locations?

Animals from other locations:

* Are Animals obtained from another facility/source?

* If yes, what kind of transport are used? Explain in detail, include what happens to the animals when they arrive at the destination, eg. health check, biological screenings for diseases/parasites etc.

* Are the animals acclimatized for a period of time prior the start of the procedure/experiment?

* If yes, how long is the acclimatization period?

* If no, explain.

DOCUMENTS

ANY OTHER ADDITIONAL DOCUMENTS TO UPLOAD (EXPERIMENTAL DESIGN DOCUMENTATION, REGISTRATION OF E.G. ABATTOIRS, LETTERS ETC.) [\(Click on the blue Add link to add documents\)](#)

Add a document here.	* Type in the name of the uploaded document here:	
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PERMITS

Do you need any of the following permits for your study?

* Section 20 permits (Act 35 of 1984 - Animal Diseases Act (DAFF) <input type="checkbox"/> Yes <input type="checkbox"/> No	* GMO certification (Act 15 of 1997) - Genetically Modified Organisms Act (DAFF) For the use of genetically modified organisms (GMOs) in research, the laboratory and programme should be DAFF certified. <input type="checkbox"/> Yes <input type="checkbox"/> No	* Nature Conservation Permits - As per Nature Conservation Ordinances- Biodiversity Act <input type="checkbox"/> Yes <input type="checkbox"/> No	* Section 21 permits (Act 101 of 1965) Medicines and Related Substances Control Act. <input type="checkbox"/> Yes <input type="checkbox"/> No	* Red Cross Permits (DAFF): For the movement of animals under veterinary restriction (e.g controlled diseases) <input type="checkbox"/> Yes <input type="checkbox"/> No	* Act 36 of 1947 - Fertilizers, Farm Feeds, Agricultural Remedies and Stock Remedies Act. For unregistered products research. <input type="checkbox"/> Yes <input type="checkbox"/> No	* Section 80(3)(Act 40 of 2000) - Meat Safety Act. Approval for human consumption (of animals). <input type="checkbox"/> Yes <input type="checkbox"/> No	* TOPS permits (Biodiversity Act, Threatened or Protected Species Regulations, DEA) Working with Threatened or Protected Species (TOPS) Regulations <input type="checkbox"/> Yes <input type="checkbox"/> No	* CITES Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES). Transport of live animals or samples of CITES species <input type="checkbox"/> Yes <input type="checkbox"/> No	* Letters from land owners, giving permission and informed consent to perform research on privately-owned land. <input type="checkbox"/> Yes <input type="checkbox"/> No
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* Are all applicable permits available? Yes No

Attach all available permits [\(Click on the blue Add link to add a permit\)](#)

Add the permit document here:	Name of the permit:	
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SPONSOR

Please complete the section below:

* Is this project sponsored by a third party outside UFS? Yes No

SPONSOR DETAILS

▼ Sponsors

STATEMENT AND DECLARATION

READ CAREFULLY THROUGH ALL THE STATEMENTS

SANS 10386:2008 - People who use animals for scientific purposes have an obligation to treat animals with respect and to ensure their welfare as an essential factor when planning and conducting studies. Researchers and teachers have direct and ultimate personal responsibility for all matters relating to the welfare of the animals they use.

The acquisition, care and use of animals for all scientific purposes in South Africa shall be in accordance with this standard and with the Animals Protection Act, 1962 (Act No. 71 of 1962).

As the Principle Investigator:

- * 1. I understand that I have a responsibility regarding the use of animals in my study
- * 2. I, the undersigned hereby certify that the conducting hereof will occur according to existing University regulations regarding the use of experimental animals.
- * 3. I understand that I am legally responsible for all aspects of the study or activities.
- * 4. I understand that the UFS appointed Veterinarian has the right to examine the animals and the implementation of the protocol unannounced at any time.
- * 5. I understand that all persons named and working under my supervision should have the appropriate training and skills required to carry out their responsibilities as indicated.
- * 6. I am appropriately qualified to conduct or supervise this study.
- * 7. I undertake to ensure I have sufficient human resources to perform the required welfare monitoring of all animals in this study.
- * 8. This study is designed in such a way that no animals are wasted;
- * 9. I undertake not to unreasonably deviate from the authorised protocol, and to report such deviations to the AEC within 24 hours (using the Amendments)
- * 10. In the event that any animal dies prior to the declared endpoint, I will ensure that the death is reported to the UFS Veterinarian and that a post-mortem will be performed by the veterinarian or registered laboratory animal technologist in the presence of the Vet and a formal report submitted to the AEC
- * 11. This study is designed in such a way that for the animals discomfort, stress and anxiety are restricted to the absolute minimum.
- * 12. This study is not a replication of similar research of which the results are known;
- * 13. All alternative methods have been investigated and that it would be impossible to achieve the goal of this study without making use of experimental animals;
- * 14. I am familiar with the regulations contained in the [GUIDE TO THE CARE & USE OF ANIMALS IN RESEARCH & TEACHING of the Interfaculty Animal Ethics Committee](#)
- * 15. I will comply with any restrictions or changes recommended by the AEC for animal experimentation with regard to this study;
- * 16. I undertake to furnish the AEC with a final report on the outcome of the study at its conclusion, including a reference to any publication arising from the study.
- * 17. Should the study period be for more than 1 year, I undertake to submit a continuation report to the AEC.
- * 18. If a Biohazard declaration is necessary, this has been submitted to the UFS Environment & Biosafety Ethics committee through an ethics application. I as PI will ensure that all participants and animal facility staff are fully informed of the hazards and that appropriate Biohazard labels are attached to each animal cage.
- * 19. I undertake to submit annually a progress report to the AEC.
- * 20. If according to the personnel of the experimental animal unit any animal involved in this study has endured unnecessary pain and they have been unable to reach me telephonically, or if I am unable to react to their call immediately, they hereby receive my authorisation to terminate the life of the animal(s) concerned as soon as possible and in a humane manner. (NB. In such a case only one telephone call will be made to your office and if you fail to act within 1 hour of the call, the life of the animal(s) will be terminated).
- * **I HAVE READ AND AGREED TO THE ABOVE STIPULATIONS**
- * **I ACKNOWLEDGE THAT ENTERING MY NAME ON THIS FORM IS THE EQUIVALENT OF MY SIGNATURE**

