



## ANIMAL TRANSFER REQUEST FORM

Form to be completed for transfer of animals on any University at Buffalo approved IACUC Protocol for change of campus, facility, investigator, protocol, account, or housing. This form will be returned if incomplete.

Please note:

Room or Building Transfers: multiple strains may be listed on the same form

IACUC Protocol Transfers: all transferred animals must be of the SAME species and strain and that species and strain must already be approved on the receiving protocol. Fill out a separate transfer form for each species, strain, room, or protocol.

Room or Building Transfer  \*\*

IACUC Protocol Transfer

\*\*If Room or Building Transfer only (no change in Protocol), you may skip the Mandatory Animal Transfer Questions.

Requested by:

Transfer Date:

Phone Number:

**Transfer From (Sending Protocol)**

**Transfer To (Receiving Protocol)**

Animal Facility			Animal Facility		
Room			Room		
Housing (Check One)	<input type="checkbox"/> Conventional	<input type="checkbox"/> HLB	Housing (Check One)	<input type="checkbox"/> Conventional	<input type="checkbox"/> HLB
	<input type="checkbox"/> MLB-CTRC			<input type="checkbox"/> MLB-CTRC	
	<input type="checkbox"/> Sterile Barrier	<input type="checkbox"/> ABSL-2		<input type="checkbox"/> Sterile Barrier	<input type="checkbox"/> ABSL-2
Investigator			Investigator		
Protocol number			Protocol number		
Contact Person			Contact Person		
Phone Number			Phone Number		
Quantity	Species	Strain (rodents)		# of cages	

**CAGE CARD NUMBERS OF ANIMALS TO BE TRANSFERRED**


Please submit form to LAF 116 BEB or email form to: Sue Campbell [susancam@buffalo.edu](mailto:susancam@buffalo.edu) ,  
 Miriam M-M [mmoldenh@buffalo.edu](mailto:mmoldenh@buffalo.edu) , and Lisa R. Powell [lrpowell@buffalo.edu](mailto:lrpowell@buffalo.edu)

Biomedical Education building Room 116, 3435 Main Street  
 Tel: (716) 829-2919 Fax: (716) 829-3249

**MANDATORY ANIMAL TRANSFER QUESTIONS FOR PROTOCOL TRANSFERS ONLY:**

1. Does the sending protocol you are transferring FROM include “The animals will be transferred to another protocol” as a disposition option (Click IACUC, Disposition Section, Question #1)?  Yes  No

2. Have the animals been exposed to any hazards\*?  Yes\*  No

\*If yes, please explain hazard exposure: \_\_\_\_\_

3. If animals are coming from High Level Barrier (HLB), Mixed Level Barrier (MLB) or a Barrier Room, please confirm their Helicobacter status.  Helicobacter POSITIVE  Helicobacter NEGATIVE

4. What procedures have these animals already undergone on the sending protocol?

- Animals are healthy and previously unused in an experiment (experimentally naïve).
- Animals were previously used for breeding and have undergone no invasive procedures.
- Animals have undergone invasive procedures but will be immediately euthanized after transfer.
- Animals may have undergone invasive procedures but are transferring to the LAF Holding Protocol for temporary holding (no breeding, no experimental procedures).
- Animals have undergone simple experimental procedures causing NO MORE than momentary or slight pain and distress. List: \_\_\_\_\_

Animals have undergone these Category D or E procedures on the sending protocol (list):  
\_\_\_\_\_  
\_\_\_\_\_

5. What is the purpose of the transfer? What procedures will the animals undergo on the receiving protocol? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sending Investigator’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Receiving Investigator’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**LAF Veterinarian’s Approval (Attending Veterinarian or Clinical Veterinarian in AV’s Absence):**

- Room Transfer ONLY (does not require veterinary approval unless there are housing status concerns).
- This IACUC Protocol transfer is APPROVED.
- This IACUC Protocol transfer is DENIED. Reason: \_\_\_\_\_

Veterinarian’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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