|  |  |  |
| --- | --- | --- |
| Logo  Description automatically generated | **Animal Care Committee**  **Animal Use Protocol -**  **Animal Incident Report**  **Confidential** | For Office Use Only  Protocol # Click or tap here to enter text.  Principle Investigator Click or tap here to enter text.  Category of Invasiveness Click or tap here to enter text.  Purpose of Animal Use Click or tap here to enter text.  Original Expiry Date Click or tap here to enter text.  Renewal Expiry Date Click or tap here to enter text. |

**Please note**: In accordance with the SMU ACC Policy for Reporting Animal Welfare Incidents, an Animal Welfare Incident Report Form must be submitted electronically to the Animal Care Coordinator if an unexpected incident results in mortality and/or compromises ≥ 20% of the population, or is above the baseline mortality outlined, justified, and approved in the animal use protocol. The SMU Consulting Veterinarian must be notified within 24 hours of the incident. If you are unsure whether an incident requires formal reporting, please consult the SMU ACC Policy for Reporting Animal Welfare Incidents, or contact animalcare@smu.ca.

|  |
| --- |
| Incident Reported By: Click or tap here to enter text.  Position/Title: Click or tap here to enter text.  Protocol #: Click or tap here to enter text.  Time of Incident Click or tap here to enter text.  Date of Incident: Click or tap here to enter text.  Date of Report Click or tap here to enter text.  Has the ACC Consulting Veterinarian been notified?  N/A  No  Yes |
| 1. **Full Description of the Incident**   Describe exactly the events leading up to the incident (if known), location of the incident, conditions contributing to the incident (if known), what occurred that warrants the use of an incident report form, etc. Attach additional sheets if needed  Click or tap here to enter text.  Describe exactly the events leading up to the incident (if known), location of the incident, conditions contributing to the incident (if known), what occurred that warrants the use of an incident report form, etc. Attach additional sheets if needed.  Click or tap here to enter text. |
| 1. **Animals Affected**   **Animal Numbers**   |  |  |  | | --- | --- | --- | | List the number and species of animals involved in the incident. If animals were affected in different ways, you can have more than one row per species:Total Number | Animal Species (common name) | Describe how animals were affected | |  |  |  | |  |  |  | |  |  |  | |  |  |  |  1. Cause of sickness or death (if known):   Click or tap here to enter text. |
| 1. **Immediate Corrective Action**   Was any immediate corrective action required?  Yes  No    If **Yes** what was done, and by whom? Please clearly describe how these actions help to mitigate the conditions causing the incident. Click or tap here to enter text. |
| 1. **Future Corrective Action** 2. Further actions or test to be performed (beyond those completed in Section 3 above):   Click or tap here to enter text.   * 1. **By whom:**   Click or tap here to enter text.   1. Recommendations for further corrective measures to be implemented (e.g., changes to SOPs\_):   Click or tap here to enter text. |
| 1. **Declaration and Signature**   By sending this application to the ACC via **Email**, I certify that all the information given here to be accurate and true and that all necessary actions have been taken as per the ACC Policy for Submitting Animal Incident Reports. I also acknowledge that this report will be filed with the applicable Animal Use Protocol.  Email to: [animalcare@smu.ca](mailto:animalcare@smu.ca) Date Submitted: Click or tap here to enter text. |



Outcome of Follow-up Action

No

Yes

For Office Use Only

Date Incident Reported to ACC

Action Required by the ACC Details of Action Requested

***Acknowledgement****:* MSVU wishes to extend its appreciation to the Animal Care Committee at Saint Mary’s University a for permission to adapt their form for use by MSVU researchers