See reverse side for additional information. Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. REGISTRATION NO. 8817

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA 21ST Century Medicine 10844 Edison Court Rancho Cucamonga, CA include Zip Code)

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional

FACILITY LOCATIONS (Sites)

21st Century	Medicin	٤									
Rancho Cucar	nonga, C	A 9173			<u></u>		50011 2000				
REPORT OF ANIMALS USED BY OR	UNDER CONTROL OF	RESEARCH FACILITY	(Attach adid	tional sheets if ne	cessary o	r use APHIS	FORM 7023A	17			
A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number which exteaching surgery, conduct accomp distress and for anesthe	of animals upon periments, , research, or tests were ad involving anying pain or to the animals which appropriate tic, analgesic, or zing drugs were	experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments surgery, or tests. (An explanation of		propriate gs would esults, or eation of s in these	F. TOTAL N OF ANIM (Cols. (D + E	IALS		
4. Dogs				<u>, , , , , , , , , , , , , , , , , , , </u>							
5. Cats				<u> </u>							
6. Guinea Pigs			-	1	+						
7. Hamsters			. 0	9						89	
8. Rabbits			1 0		-						
9. Non-human Primates			 		 			· · · · · · · · · · · · · · · · · · ·	· · · · · · ·		
10. Sheep		 	 		+						
11. Pigs	ļ				+				-		
12. Other Farm Animals											
13. Other Animals				·	-						
		1	-								
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ASSURANCE STATEMENTS						IIN L	U U		71.11	orior to, duri	nġ.
ASSURANCE STATEMENTS 1) Professionally acceptable and following actual research	ircn, leaching, learing.	ne care, treatment, and surgery, or experiment		als, including appr illowed by this res	oriate use earch lac	d bl adesthet	NOV –	1 999			J.

- 2). Each principal investigator has considered alternatives to painful procedures
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions affacts by the sheet and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

(b) (c)		CERTIF (Chie
Ca)(7)(\mathcal{L}	(Cilie)
SIGNATU	7 0	INSTITUTIONAL OFFICIAL

CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

Licertify that the above is true, correct, and complete (7 U.S.C. Section 2143).

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

10/20/9

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete)

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)



1. REGISTRATION NO.

FORM APPROVED OMB NO 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zip Code)

METABOLEX, INC. 3876 BAY CENTER PLACE HAYWARD, CA 94545

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or field for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS (Siles)

METABOLEX, INC.

RM 121A

3876 BAY CENTER PL. HAYWARD, CA 94545

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C Number of animals upon which leaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F. TOTAL NO. OF ANIMALS (Cols. C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters		103	\		103
8. Rabbits					
9. Non-human Primates					
10. Sheep				*	
11. Pigs					
12. Other Farm Animals			-		
13. Other Animals					
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Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of phesinaic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility

2). Each principal investigator has considered alternatives to painful procedures

3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all succeptions is attached to this annual report. In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the expected animals affected.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate dequacy of other aspects of anunal care and use.

(b)(7)(c)	(Chief Executive O	HEADQUARTES RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) above is true, correct, and complete (7 U.S.C. Section 2143)	
SIGNATURE OF CE O. OR IN	AL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)	DATE SIGNED
APHIS FORM 7023	(Replaces VS FORM 18-23 (OCT 88)), which is obsolete)	

(AUG 91)

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