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 10037 58 R 003

FORM APPROVED OMB NO 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zip Code; Goodwin Inst. for Cancer Research

1850 N.W. 69th Avenue P.O. Box 3091 Plantation, FL 33313

Status: Inactive

See Attached

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 sheets if necessary) **FACILITY LOCATIONS (Sites)** 

Same as abou REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A.) B. Number of Number of animals upon which teaching, C Number of Number of animals upon animals being animals upon experiments, research, surpery or tests were which experiments, conducted involving accompanying pain or distress which teaching, Animals Covered By The Animal bred. teaching, research, surgery, or tests were conditioned, or to the animals and for which the use of appropriate research. TOTAL NO anesthetic, analogsic, or tranquilizing drugs would Wellare Regulations held for use in experiments, or OF ANIMALS conducted involving have adversely affected the procedures, results, or teaching, testing, tests were accompanying pain or experiments, interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of conducted distress to the animals involving no research, or (Cols. C + and for which appropriate the procedures producing pain or distress in these surgery but not D + E) pain, distress, or anesthetic, analgesic, or yet used for such animals and the reasons such drugs were not used use of paintranquilizing drugs were relieving drugs. must be attached to this report) purposes. used 0 Dogs O Cats Guinea Pigs Hamsters 0 Rabbits Non-human Primates 0 Sheep 11. Pigs 0 12. Other Farm Animals mice 13. Other Animals 0 0 000 000 000

- Professionally acceptable standards governing the care, treatment, and use of animals, including approxiate use of anesthetic, 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

**ASSURANCE STATEMENTS** 

- 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 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 species 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 aminal care and use

(b/(a), (b) 27/60	(Chief Executive Offi	IEADQUARTES RESEARCH FACILITY OFFICIAL ficer or Legally Responsible Institutional Official) over is true, correct, and complete (7 USC Section 2143)	(b)(0.(b)(7)(c)
SIGNATURE OF C. F.O. OR INSTITU		NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type	Or Print)  DATE SIGNED  PLANT
APHIS FORM 7023 (Replac (AUG 91)	ces V\$ (OCT 88), w	which is obsolete) $(L)(G)(G)(G)$	9/28/99

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. 58R004

FORM APPROVED OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA

include Zip Code)
Note Marine Laboratory 1600 Thompson Pkwy.

P.O. Box 3091

Sarasota, FL 34236

Status: Active

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 sheets if necessary.)

FACILITY LOCATIONS (Sites)

See Attached

1600 Ken Thompson Parkway

Sarasota, FL 34236

B. Number of	C Number of		E. Number of animals upon which teaching,	F.
animals being bred, conditioned, or held for use in teaching, lesting, experiments, research, or surgery but not yet used for such purposes.	animals upon which leaching, research, experiments, or lests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, leaching, 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.	experiments, research, surgery or lests 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, resuits, or interpretation of the teaching, research, appropriate tests. (An explanation of	TOTAL NO. OF ANIMALS  (COIS. C + D + E)
				0
				0
				0
				0
,				0
				0
				0
·				0
				0
0	2	0	0	2
0	4	0	0	4
	bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	bred, conditioned, or held for use in teaching, lesting, experiments, research, or surgery but not yet used for such purposes.   The purposes of the purpose	animals being bred, conditioned, or held for use in leaching, lesting, experiments, research, or surgery but not yet used for such purposes.  Disconditioned, or held for use in leaching, lesting, experiments, research, or surgery but not yet used for such purposes.  Disconditioned, or held for use in leaching, lesting, research, or surgery but not yet used for such purposes.  Disconditioned, or held for use in lests were conducted involving no pain, distress, or use of pain-relieving drugs.  Disconditioned, or held for use in lests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	animals being bred, conditioned, or held for use in teaching, lesting, experiments, or surgery but not yet used for such purposes.  Which teaching, research, surgery, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.  Which experiments, or teaching, research, surgery, or tests were conducted involving pain or distress to the animals and of which happropriate anesthetic, analgestic, or used of pain-relieving drugs.  Which experiments, conducted involving accompanying pain or distress to the animals and to which appropriate anesthetic, analgestic, or used or distress to the animals and the reasons such drugs were not used must be attached to this report).

## **ASSURANCE STATEMENTS**

- Prolessionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, 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

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- 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 Coinmittee (IACUC). A summary of all such exceptions 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 species 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.

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

I certify 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

10/1/99

APHIS FORM 7023

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