See attached form for additional information. Interagency Report Contro 2001

1. CERTIFICATE NUMBER:

94-R-0009 CUSTOMER NUMBER: 869

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FORM APPROVED OMB NO. 0579-0036

UNITED STATES DEPARTMENT OF AGRICULTURE

ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Universidad Central Del Carib School Of Medicine Call Box 60-327 Bayamon, PR 00960

Telephone: (787) -798-3001

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or 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 an 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 wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reask such drugs were not used must be attached to this report.) | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E ) |
|---|---|---|--|--|--|
| 4. Dogs   | N/A   | N/A   | N/A  | N/A  | N/A  |
| 5. Cats   | N/A   | N/A   | N/A  | N/A  | N/A  |
| 6. Guinea Pigs  | N/A   | N/A   | · N/A  | N/A  | N/A  |
| 7. Hamsters   | N/A   | N/A   | N/A  | N/A  | N/A  |
| 8. Rabbits  | N/A   | N/A   | N/A  | N/A  | N/A  |
| 9. Non-human Primates                                 | N/A   | N/A   | N/A  | N/A  | N/A  |
| 10. Sheep   | N/A   | N/A   | N/A  | N/A  | N/A  |
| 11. Pigs  | N/A   | N/A   | N/A  | N/A  | N/A  |
| 12. Other Farm Animals                                | N/A   | N/A   | N/A  | N/A  | N/A  |
| 13. Other Animals                                     |   |   |  |  |  |
|   |   |   |  |  |  |

### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese 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 standards and regulations be specified and explained by the principal investigator and ap 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 inc 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.

|   | ATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL RECUTIVE Officer or Legally Responsible Institutional Official ) |             |
|---|---|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)  | DATE SIGNED |
|   |   | 30-1X-04    |

APHIS FORM 7023 (AUG 91)

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

893

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21!

> UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0010 CUSTOMER NUMBER:

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Ponce School Of Medicine P.O. Box 7004 Ponce, PR 00732

Telephone: (787) -840-2575

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| A.  Animals Covered By The Animal Welfare Regulations |             | Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. | Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or 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 an 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 whithe use of appropriate anesthetic, analgesic, or tranquific drugs would have adversely affected the procedures, resor interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F.  TOTAL NUMBE OF ANIMALS  ( COLUMN: C + D + E |
|---|-------------|--|----|--|----|---|----|--|---|
| 4. Dogs   |             |  |    |  |    |   |    |  | 0   |
| 5. Cats   |             |  |    |  |    |   |    |  | 0   |
| 6. Guinea Pigs  |             |  |    |  |    |   |    |  | 0   |
| 7. Hamsters   | <del></del> |  |    |  |    |   |    |  | 0   |
| 3. Rabbits  |             |  |    |  |    |   |    |  | 0   |
| 9. Non-human Primates                                 |             |  |    |  |    |   |    |  | 0   |
| 0. Sheep  |             |  |    |  |    |   |    |  | 0   |
| 1. Pigs   |             |  |    |  |    |   |    |  | 0   |
| 2. Other Farm Animals                                 |             |  |    |  |    |   |    |  | 0   |
| 3. Other Animals                                      |             |  | -  |  |    |   | -  |  |   |
| / Rats  |             | 364  | 1  | ,464   |    |   | T  |  | 1828  |
| Mice  |             | 365  |    | 309  |    |   |    |  | 674   |

## ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research teaching, testing, surgery, or experimentation were followed by this research facility.
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- veterinary care and to oversee the adequacy of other aspects of animal care and use.

|    | ICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  If Executive Officer or Legally Responsible Institutional Official) |             |
|----|---|-------------|
| S  | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)  | DATE SIGNED |
| AF | ich is obsolete.)   | -///        |

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21!

> UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0012

> CUSTOMER NUMBER: 870

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

San Juan Bautista School Of Medicine Po Box 4968 Caguas, PR 00726

See attached form for

additional information.

Telephone: (787) -743-3038

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS U                                   | JSED BY OR UNDER C  | ONTROL OF RESEAR  | CH FACILITY ( Attach additiona   | al sheets if necessarv or use APHIS Form 7023A )   | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A ) |  |  |  |  |  |  |  |  |
|---|---|---|--|--|---|--|--|--|--|--|--|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or 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 an 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 wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F.  TOTAL NUMBER OF ANIMALS  ( COLUMNS C + D + E )  |  |  |  |  |  |  |  |  |
| 4. Dogs   |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 5. Cats   |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 6. Guinea Pigs  | · Angelettishing  |   |  |  |   |  |  |  |  |  |  |  |  |
| 7. Hamsters   |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 8. Rabbits  |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 9. Non-human Primates                                 |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 10. Sheep   |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 11. Pigs  |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 12. Other Farm Animals                                |   |   |  |  |   |  |  |  |  |  |  |  |  |
| 13. Other Animals                                     |   |   |  |  |   |  |  |  |  |  |  |  |  |
|   |   |   |  |  |   |  |  |  |  |  |  |  |  |

#### ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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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 ap 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 inc 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.

er or Legally Responsible Institutional Official)

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

DATE SIGNED

9/24/04

This i port is required by law (7 USC 2143). Failure to report according to the regulations can

See attached form for additional information

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0012

CUSTOMER NUMBER: 870

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

San Juan Bautista School Of Medicine Po-Box-74365-P O Box 4968 San-Juan, PR-00936 Caguas, PR 00726-49604

Telephone: (787) -743-3038

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USE | J BY OK UNDER  |    |  | T  |   |          | heets if necessary or use APHIS Form 7023A )   |  |
|---|-----|--|----|--|----|---|----------|--|--|
| A.  Animals Covered By The Animal Welfare Regulations | В.  | Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching,<br>testing,<br>experiments,<br>research, or<br>surgery but not ye | 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 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, a | <b>E</b> | 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 | TOTAL NUMBER<br>OF ANIMALS<br>( COLUMNS<br>C + D + E ) |
| 4. Dogs   |     |  | l  |  |    |   |          |  |  |
| 5. Cats   |     |  |    |  |    |   |          |  |  |
| 6. Guinea Pigs  |     |  |    |  |    |   |          |  |  |
| 7. Hamsters   |     |  |    |  |    |   |          |  |  |
| 8. Rabbits  |     |  |    |  |    |   |          |  |  |
| 9. Non-human Primate                                  |     |  |    |  |    |   |          |  |  |
| 10. Sheep   |     |  |    |  |    |   |          |  |  |
| 11. Pigs  |     |  |    |  |    |   |          |  |  |
| 12. Other Farm Animals                                |     |  |    |  | 1  |   |          |  |  |
|   |     |  | ļ  |  |    |   | -        |  |  |
| 13. Other Animals                                     |     |  |    |  |    |   | 1        |  |  |
|   | -   |  |    | enemental appropriate proprieta de la contraction de la contractio | †  |   | 1        |  |  |
|   |     |  | 1  |  |    |   | -        |  |  |
|   |     |  |    |  | †  |   | 1        |  |  |

### ASSURANCE STATEMENTS

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- 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

| · · · · · · · · · · · · · · · · · · · |   |
|---------------------------------------|---|
|                                       | FERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  [ Executive Officer or Legally Responsible Institutional Official ) |
|                                       | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print DATE SIGNED   |
|                                       | 12/20/  |
|                                       | ch is obsolete.   |

# Column E Explanation

This form is intended as an aid to completing the Column E explanation. It is not an official form and its use is voluntary. Names, addresses, protocols, veterinary care programs, and the like, are not required as part of an explanation. A Column E explanation must be written so as to be understood by lay persons as well as scientists.

| 1. | Registration Number:  | 94-R-0012               |                  |                  |                   |       |
|----|---|-------------------------|------------------|------------------|-------------------|-------|
| 2. | Number  |                         | of animals used  | d in this study. |                   |       |
| 3. | Species (common name)   |                         | _of animals used | in the study.    |                   |       |
| 4. | Explain the procedure pro   | oducing pain and/or dis | stress.          |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
|    | ·   |                         |                  |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
| 5. | Provide scientific justifical determine that pain and/o Item 6 below) |                         |                  |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
|    |   |                         |                  |                  |                   |       |
| 6. | What, if any, federal regul<br>(CFR) title number and th              |                         |                  |                  | of Federal Regula | tions |
|    | Agency  | CFR                     |                  |                  |                   |       |
|    | *No animals were  | used during t           | he vear 200      | Δ.               |                   |       |

## All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21! additional information.

Interagency Report Control News

UNITED STATES DEPARTMENT OF AGRICULTURE

1. CERTIFICATE NUMBER: 94-R-0103 CUSTOMER NUMBER: 864

FORM APPROVED OMB NO. 0579-0036

ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**ANNUAL REPORT OF RESEARCH FACILITY** (TYPE OR PRINT)

University Of Puerto Rico-Rio Piedras Ca

Po Box 23360

San Juan, PR 00931

DEC 032004

Telephone: (787) -764-0000

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | USED BY OR UNDER C  | CONTROL OF RESEAR   | CH FACILITY ( Attach additiona   | al sheets if necessarv or use APHIS Form 7023A )   | <b></b>                  |
|---|---|---|--|--|--------------------------|
| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or 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 an 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 wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | ( COLUMNS<br>C + D + E ) |
| 4. Dogs   | 6   | 0   | 0  | 0  | 0                        |
| 5. Cats   | 0   | 0   | 0  | 0  | 0                        |
| 6. Guinea Pigs  | 0   | 0   | 0  | 0  | 0                        |
| 7. Hamsters   | 0   | 0   |  | 0  | 0                        |
| 8. Rabbits  | 0   | 0   | 0  | ව  | 0                        |
| 9. Non-human Primates                                 | 0   | 0   | 0  | 0  | 0                        |
| 10. Sheep   | 0   | θ   | 0  | 0  | 0                        |
| 11. Pigs  | 0   | 0   | . 0  | 0  | 0                        |
| 12. Other Farm Animals                                | 0   | ٥   | 0  | 0  | 0                        |
| 13. Other Animals                                     | ٥   | ٥   | ٥  | 0  | 0                        |
|   |   |   |  |  |                          |

### ASSURANCE STATEMENTS

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| · —· · · ·                                    | TION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ecutive Officer or Legally Responsible Institutional Official) |             |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)   | DATE SIGNED |
|   |  | no 24/0     |

-23 (OCT 88), which is obsolete.)

Interagency Report Control No

This report is required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21! See attached form for additional information.

960

94-R-0109

FORM APPROVED OMB NO. 0579-0036

#### UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

University Of Puerto Rico **Medical Sciences Campus** Po Box 365067 San Juan, PR 00936

1. CERTIFICATE NUMBER:

CUSTOMER NUMBER:

Telephone: (787) -758-2525

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or 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 an 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 wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | F.  TOTAL NUM OF ANIM  ( COLUM C + D + |
|---|---|---|--|--|--|
| 4. Dogs   |   |   |  |  |  |
| 5. Cats   |   |   |  |  |  |
| 6. Guinea Pigs  |   |   |  |  |  |
| 7. Hamsters   |   | 65  | 278  |  | 343                                    |
| 8. Rabbits  |   | 10  |  |  | 10                                     |
| 9. Non-human Primates                                 | 2221  | 54  | 146  |  | 200                                    |
| 10. Sheep   |   |   |  |  |  |
| 11. Pigs  |   | 16  | 21   |  | 37                                     |
| 12. Other Farm Animals                                |   |   |  |  |  |
| 13. Other Animals                                     |   |   |  |  |  |
| 3.Lined Squirrels                                     |   | 2   | 13   |  | 15                                     |
|   |   |   |  |  |  |

### ASSURANCE STATEMENTS

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- 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 HEADQUARTERS RESEARCH FACILITY OFFIC | ΙΑL |
|---|-----|
|   |     |

(Chief Executive Officer or Legally Responsible Institutional Official)

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

DATE SIGNE

12/8/0

DEC 0 2 2004 see alluched form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0110

| E

FORM APPROVED OMB NO. 0579-0026

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

CUSTOMER NUMBER: 856

Inter American Univ Of P R-Metropolitan P.O. Box 191293 San Juan, PR 00919

Telephone: (809) -250-1912

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS                                     | REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY ( Attach additional sheets if necessary or use APHIS Form 7023A ) |   |    |  |    |  |    |   |  |
|---|---|---|----|--|----|--|----|---|--|
| A.  Animals Covered By The Animal Welfare Regulations | 6.  | Number of animal being bred, conditioned, or neid for use in teaching, experiments, research, or surgery but not yeused for such purposes.  | C. | Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or 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 an for which appropriate anesthetic, analgeste, or tranquillaing 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 whithe use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, response would have adversely affected the procedures or interpretation of the teaching, research, superiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | TOTAL NUMBER<br>OF ANIMALS<br>( COLUMNS<br>C + D + E ) |
| 4. Dogs   |   |   |    |  |    |  |    |   | 0  |
| 5. Cats   |   |   |    |  |    |  |    | :   | 0  |
| 6. Guines Pigs  |   |   |    |  |    | of B Plane (Bread or March of the Section of the Se |    |   | 0  |
| 7. Hamsters   |   |   |    |  |    |  |    | · ·   | 0  |
| 8. Rabbits  |   |   |    |  |    |  |    |   | 0  |
| 9. Non-human Primates                                 |   |   |    |  |    |  |    |   | 0  |
| 10. Sheep   |   |   |    |  |    |  |    |   | 0  |
| 11. Pigs  |   |   |    |  |    |  |    |   | 0  |
| 12. Other Farm Animals                                |   |   |    |  |    | AD-144   |    | 10-47 1 A-41 A-42 A-42 A-42 A-42 A-42 A-42 A-42 A-42  | 0  |
| 13. Other Animals                                     |   |   |    |  |    |  |    |   | 0  |
|   |   |   |    |  |    |  |    |   |  |
|   |   | This can appear to the beautiful the second of the second |    |  |    |  |    |   |  |
|   |   |   |    |  |    |  |    |   |  |

## ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestellic, analgesic and tranquilizing drugs, prior to, during, and following actual reset 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 standards and regulations be specified and explained by the principal investigator and applicational Animal Care and Use Committee (ACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the (ACUC-approved exceptions, this aummary incomes 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 tors and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFIC                   | JAL |
|---|-----|
| (Chief Executive Officer or Legally Responsible Institutional Official) |     |

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

DATE SIGNED

12/1/04

NOV 3 0 2004

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

Thi report is aquired by law (7 USC 2143). Failure to report according to the regulations can

result in an order to cease and desist and to be subject to penalties as provided for in Section 21!

1. CERTIFICATE NUMBER: 94-R-0111 CUSTOMER NUMBER: 19118

FORM APPROVED OMB NO. 0579-0036

**ANNUAL REPORT OF RESEARCH FACILITY** 

(TYPE OR PRINT)

Caribbean Bio Labs Inc Po Box 325

San German, PR 00683

Telephone: (787) -892-2650

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| ۵  | R         | Number of animal  | C. | Number of  | D          | Number of animals upon   | E | Number of animals upon which teaching, experiments,   | F.  |
|--|-----------|---|----|--|------------|--|---|---|---|
| Animals Covered-<br>By The Animal<br>Welfare Regulations | <b>J.</b> | being bred,<br>conditioned, or<br>held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not ye<br>used for such<br>purposes. |    | animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | <b>J</b> . | which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals an for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. |   | research, surgery or tests were conducted involving accompanying pain or distress to the animals and for wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reast such drugs were not used must be attached to this report | TOTAL NUMBE<br>OF ANIMALS<br>( COLUMN:<br>C + D + E |
| 4. Dogs  | !         |   |    |  |            |  |   | 4-0   | ·   |
| 5. Cats  |           |   |    |  |            |  | 7 | JIAU  |   |
| 6. Guinea Pigs   |           |   |    |  |            |  |   |   |   |
| 7. Hamsters  |           |   |    |  |            |  |   |   |   |
| 8. Rabbits   |           | ٦   |    | 19   |            | 0  | L | 0   | 19  |
| 9. Non-human Primates                                    |           |   |    |  |            |  |   |   |   |
| 10. Sheep  |           |   |    |  |            |  | L |   |   |
| 11. Pigs   |           |   |    |  |            |  | L |   |   |
| 12. Other Farm Animals                                   |           |   |    | MA   |            |  |   |   |   |
| ì  |           |   |    |  |            | OA   |   |   |   |
| 3. Other Animals   |           |   |    |  | 4          |  | Γ |   |   |
|  |           |   |    |  |            |  |   |   |   |
| İ  |           |   |    |  |            |  | T |   |   |
| <u> </u>   | 1         |   | 1  |  | <u> </u>   |  | 1 |   |   |

#### **ASSURANCE STATEMENTS**

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.
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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 ap 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 inc 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 author | inty to disare the provision of adequate voluntary date and to discrete the deequate of entire terms.       |             |
|---|---|-------------|
|   | N BY HEADQUARTERS RESEARCH FACILITY OFFICIAL<br>tive Officer or Legally Responsible Institutional Official) |             |
|   | NAME & TITLE OF CE O. OR INSTITUTIONAL OFFICIAL. (Type or Print.)   | DATE SIGNED |
| (AUG91)  * From October 1/2003 to 1   | November 30/2003<br>EE 11/29/04   | Nov 201 04  |

This report is required by law (? USC 21 43) Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150

Set reverse side for additionalinformation Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 94-R-0112

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 include ZIp Code)

Caribbean Marine Mammal Laboratory PO Box 21150

San Juan PR 00928 TEL 787-766-1717

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.)

FACILITYLOCATIONS (Sites)

| Caribbean Marine Mar<br>Universidad Metropoli        |  | ′   |   |  |   |
|--|--|---|---|--|---|
|  |  |   |   | Para da Para da Maria  |   |
| A.  Animals Covered By The Anima 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 teats were conducted involving no pain, distress. or use of pain-relieving drugs. | Y (Attach additional sheets if net 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 tranquillzing drugs were used | Espainy or use APHIS FORM 7023A)  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 those animals and the reasons such drugs were not used must be attached to this report) | F.  TOTALNO OF ANIMALS  (Cols. C + D + E) |
| 4. Dogs  |  |   |   |  |   |
| 5. Cats  |  |   |   |  |   |
| 6. Guinea Pigs                                       |  |   |   |  |   |
| 7. Hamsters  |  |   |   |  |   |
| 8. Rabbits   |  |   |   |  |   |
| 9. Non-human Primates                                |  |   |   |  |   |
| 10. Sheep  |  |   |   |  |   |
| 11., Pigs  |  |   |   |  |   |
| 12. Other Farm Animals                               |  |   |   |  |   |
|  |  |   |   |  |   |
| 13 Other Animals                                     |  |   |   |  |   |
| West Indian manatee                                  | 1 (in rehab)   |   |   |  |   |
|  |  |   |   |  |   |
|  |  |   |   |  |   |
| ASSURANCE STATEMENTS                                 |  |   |   |  |   |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals including appropriate 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
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- 4) The attending veterinarianfor 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 HEADQUARTERS RES  Executive Officer or Legally Responserily that the above is true, correct, and comple | sible institutional Official)                 |                         |
|--|---|-------------------------|
| NAME & TITLE OF  | CEO OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED  8 Dec 2004 |

This report is required by law (? USC 21 43) Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 2150

Set reverse side for additionalinformation

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 94-R-0112

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

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

Caribbean Marine Mammal Laboratory PO Box 21150

San Juan PR 00928 TEL 787-766-1717

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.)

FACILITYLOCATIONS (Sites)

| Punta Salinas Radar Si<br>Manatee Re-introducti     |   |   |   |   |  |  |
|---|---|---|---|---|--|--|
| Wianatee Re-introducti                              | on sca pen  |   |   |   | · · · · · · · · · · · · · · · · · · ·  |  |
| REPORT OF ANIMALS USED BY                           | OR UNDER CONTROL O  | F RESEARCH FACILIT  | Y (Attach add   | litional sheets if ne   | cessary or use APHIS FORM 7023A)   |  |
| A. Animals Covered By The Anima Welfare Regulations | B.Number of<br>animals being<br>bred,<br>conditioned, or<br>held for use in<br>teaching, testing,<br>experiments,<br>research, or<br>surgery but not<br>yet used for such<br>purposes | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress. or use of pain-relieving drugs. | which ex-<br>teaching<br>surgery,<br>conducte<br>accompa<br>distress<br>and for<br>anesthet | of animals upon periments, research, or tests were id involving unying pain or to the animals which appropriate ic, analgesic, or eing drugs were | 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 those enimals 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   |   |   |   |   |  |  |
| 8. Rabbits  |   |   |   |   |  |  |
| 9. Non-human Primates                               |   |   |   |   |  |  |
| 10. Sheep   |   |   |   |   |  |  |
| 11., Pigs   |   | <u></u>   |   |   |  |  |
| 12. Other Farm Animals                              | 1   |   | :   |   |  |  |
|   |   |   |   |   |  |  |
| 13 Other Animals                                    |   |   |   |   |  |  |
| West Indian manatee                                 | 1 (released   | n 23 Dec 20   | 4)  |   |  |  |
|   |   |   |   |   |  |  |
|   |   |   |   |   |  |  |
| ASSURANCE STATEMENTS                                |   |   |   |   |  |  |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals including appropriate 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
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- 4) The attending veterinarianfor 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.

| (Chief Executive Officer or I | JARTERS RESEARCH FACILITY OFFICIAL  Legally Responsible Institutional Official) , correct, and complete (7 U.S.C. Section 2143). |            |
|-------------------------------|--|------------|
|                               | NAME & TITLE OF CEO OR INSTITUTIONAL OFFICIAL (Type or Print)  | 8 Dec 2004 |
|                               |  |            |

NOV 3 0 2004

See attached form for additional information.

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

1. CERTIFICATE NUMBER: 94-R-0113
CUSTOMER NUMBER: 25170

FORM APPROVED OMB NO. 0579-0036

Pace Analytical Services Inc Po Box 325 San German, PR 00683

Telephone: (787) -892-2650

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

FACILITY LOCATIONS (Sites) - See Atached Listing

| A.  Animals Covered By The Animal Welfare Regulations | B. Number of animal being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not ye used for such purposes. | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use or pain-relieving drugs. | D. Number of animals upon<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals an<br>for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>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 wh the use of appropriate anesthetic, analgesic, or tranquiliz drugs would have adversely affected the procedures, res or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reask such drugs were not used must be attached to this report. | OF ANIMALS  ( COLUMNS  C + D + E |
|---|---|---|--|---|----------------------------------|
| 4. Dogs   |   |   |  | 0   |                                  |
| 5. Cats   |   |   | NA   | U   |                                  |
| 6. Guinea Pigs  |   |   |  |   |                                  |
| 7. Hamsters   |   |   |  |   |                                  |
| 8. Rabbits  | 7   | 19  | 0  | 0   | 19                               |
| 9. Non-human Primates                                 |   |   |  |   |                                  |
| 10. Sheep   |   |   |  |   |                                  |
| 11. Pigs  |   |   |  |   |                                  |
| 12. Other Farm Animals                                |   |   |  |   |                                  |
|   |   |   |  |   |                                  |
| 13. Other Animals                                     |   |   | VIA  |   |                                  |
|   |   |   | () (()   | 14  | \                                |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual reset teaching, testing, surgery, or experimentation were followed by this research facility.
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|    |                     | ION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL cutive Officer or Legally Responsible Institutional Official) |             |
|----|---------------------|--|-------------|
| SI | AL                  | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)   | DATE SIGNED |
| AC | 3 (OCT 88) which is | obsolete.)   |             |

\* From Dec 1/2003 to Sept 30/04

11/29/04