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

FORM APPROVED OMB NO. 0579-0036

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

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Harbor-UCLA Research and Education Institute 1124 W. Carson Street Torrance, CA 90502

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 (Siles)

C-1, C-1 Annex, C-2, D-1, D-4, E-1, E-1 Annex, E-3, E-4, F-1, F-1 Annex, F-2, F-6, F-7,

RB-1, RB-2, RB-2 ANnex

	R UNDER CONTROL OF	RESEARCH FACILITY	(Attach adiditional sheets if ne	cessury or use APHIS FORM 7023A.)	
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 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 ANIMAL (Cols. C. D + E)
4. Dogs			82		82
5. Cats			9		9
6. Guinea Pigs			20		20
7. Hamsters					
8. Rabbits		22	526		548
9. Non-human Primates			·		
10. Sheep			213		213
11. Pigs			87		87
Goat 12. Other Farm Animals			8		8
Calf			18		18
13. Other Animals	·			₹	
	·				

ASSURANCE STATEMENTS

- 1) Professionally 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.
- 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 is attached to this annual report 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 and a second research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy and a second research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy and the second research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequate veterinary care and the oversee the overseenth of the oversee the oversee the oversee the oversee the oversee the oversee the ov animal care and use.

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)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print). DATE SIGNED 9/30/99

APHIS FORM 7023 (AUG 91)

(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

1. REGISTRATION NO.

FORM APPROVED // OMB NO 0579-0036 /

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

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

University of Southern California 2011 Zonal Ave., HMR 214 Los Angeles, CA 90033

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 (Siles)

USC, University PArk

Site I - USC, Health Sciences Campus

Los Angeles, CA 90089

2011 Zonal Ave., HMR 214 Los Angeles, CA 90033

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach adictional sheets if necessary or use APHIS FORM 7023A) A. B. Number of C. Number of D							
Animals Covered By The Animal Wellare Regulations	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 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).	TOTAL NO. OF ANIMALS (Cois. C + D + E)		
4. Dogs	0	4	35	0	39		
5. Cats	0	. 0	0	0	0		
6. Guinea Pigs	0	0	156	0	156		
7. Hamsters	0	0	57	0	57		
8. Rabbits	0	424	1781	0	2.205		
9. Non-human Primates	0	0	. 0	0	0		
10. Sheep	0	0	0	0	0		
11. Pigs	0	7	330	0	337		
12. Other Farm Animals	0	0	0	0	0		
13. Other Animals	0	0	0	0	0		
ASSURANCE STATEMENTS				In S & B E I V S In II	·		

1) Professionally acceptable standards governing the care, treatment, and use of animals, including approvate user of Swesthetic, analgesic, and tranquilizing drups, prior to, during, and following actual research, feaching, festing, surgery, or experimentation were followed by this research facility:

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

1) 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 inclindes a brief explanation of the exceptions, as well approved exceptions, this summary inclindes a brief explanation of the exceptions, as well approved exceptions, this summary inclindes a brief explanation of the exceptions.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary. Should be substituted the adequacy of other aspects of animal care and use.

	CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL	
aller robatas	(Chief Executive Officer or Legally Responsible Institutional Official)	
(b)(6), (b)(7)(c)	Ficertify that the above is true, correct, and complete (7 U.S.C. Section 2143) (6) (6)	

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

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

DATE SIGNED

10/22/99

APHIS FORM 7023 (AUG 91)

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

DIST : ::s.s.s.