Interagency Report Control No. 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. REGISTRAFADE 10082 1478-0082

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 fofe's-New England Medical Center, 171 Harrison Avenue, NEMC #112

2nd Floor South Boston, MA 02111 Status: Active

(P)(P)

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

NFI: 0 1 1999

			must be attached to this report).	
		86	22	108
	2	3		5_
	70	29	10	109_
		. 16		16
	11	125		136
				0
		29		29
		185		185
				1 hors 6
	1//		·	1 Cow
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			11 125	

ASSURANCE STATEMENTS

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including approviate 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

NSTITUTIONAL OFFICIAL

- 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. 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	I.
(Chief Executive Officer or Legally Responsible Institutional ()fficial)	

Ecertify 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

)(b)(7)(C)

30 Nov 99

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 (OCT 88), which is obsolete)

SIGNATURE O

TUFTS-NEW ENGLAND MEDICAL CENTER, INC.

Division of Laboratory Medicine

NEMC #112 171 Harrison Avenue, Boston, Massachusetts 02111 Phone: (617) 636-5611 Fax: (617) 636-0494 14R0082

An Association of New England Medical Center and Tufts University Schools of Medicine, Dental Medicine, Veterinary Medicine and Sackler Biomedical Sciences

29 November 1999

Elizabeth Goldentyer, DVM Director, Animal Care APHIS Eastern Regional Office 920 Main Campus Drive Suite 200, Unit 3040 Raleigh, NC 27606 DEC 01 1999

Subject:

Annual Report of Research Facility for 1 Oct 1998 through 30 Sept 1999

Registration # 14-R-0082

Dear Dr.Goldentyer:

Enclosed please find our annual statistical report pertaining to research activities at Tufts-New England Medical Center. The uses of animals reported in the category corresponding to USDA Category E (animal pain &/or distress without alleviation) are explained in the following sections.

(6)(4)