UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: CUSTOMER NUMBER: 19

95-R-0002

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

University of Hawaii at Manoa Office of the Chancellor Hawaii Hall 202, 2500 Campus Road Honolulu, HI 96822



Telephone: (808) 956-6635

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 I	JSED BY OR UNDER C	CONTROL OF RESEAR	CH FACILITY ( Attach additiona	al sheets if necessarv 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 reasc such drugs were not used must be attached to this report	( COLUMNS C + D + E )
4. Dogs	0	0	0	0	0
5. Cats	0	1	0	0	1
6. Guinea Pigs	0	0	0	. 0	0
7. Hamsters	131	25	70	0	95
8. Rabbits	16	13	0	0	13
9. Non-human Primates	22	0	0	0	0
0. Sheep	0	0	0 -		0
1. Pigs	0	0	0	0	0
2. Other Farm Animals	0	0	0	. 0	0
3. Other Animals					
olphins	. 0	2	0	0	2
alse Killer W	hale 0	1	0	. 0	1
onk Seals	0	2	0	0	2
ASSURANCE STATEMENTS	1				

- 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 reservances. teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures
- 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 approximately approxim 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 in 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 HEADQUARTERS RESEARCH FACILITY OFFICIAL

( Chief Executive Officer or Legally Responsible Institutional Official )

APHIS FC

SIGNATU

(AUG ar )

DATE SIGNED

OCT 2 4 2005

See attached form for additional information. Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 95-R-0003 CUSTOMER NUMBER: 18

FORM APPROVED OMB NO. 0579-0036

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

Queen'S Medical Center 1301 Punchbowl Street Honolulu, HI 96813

Telephone: (808) -538-9011

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

				al sheets if necessarv 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.	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 NUMBE OF ANIMALS  ( COLUMN) C + D + E
4. Dogs		· · · · · · · · · · · · · · · · · · ·			
5. Cats		<del>-</del> -,			
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primates					
10. Sheep					- end
11. Pigs					
12. Other Farm Animals					
13. Other Animals					
onregulated An	imals				
Mouse pups		56			56
Adult rats		36			36

## ASSURANCE STATEMENTS

- 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 reservables 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 app 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 in 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 HEADQUARTERS RESEARCH FACILITY OFFICIAL	
	DATE
	11/22

See attached form for additional information.

18

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 95-R-0003 **CUSTOMER NUMBER:** 

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Queen'S Medical Center 1301 Punchbowl Street Honolulu, HI 96813

Telephone: (808) -538-9011

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 I	USED BY OR UNDER C	CONTROL OF RESEAR	CH FACILITY ( Attach addition:	al sheets if necessarv 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 reasc such drugs were not used must be attached to this report	( COLUMNS C + D + E
4. Dogs					0
5. Cats					0
6. Guinea Pigs				·	0
7. Hamsters					0
8. Rabbits					0
9. Non-human Primates					0
′ં. Sheep					0
11. Pigs					0
12. Other Farm Animals					0
13. Other Animals				<u>                                     </u>	
13. Other Animals  lonregulated		-			0
animals			83		83
	L	<u> </u>		1	I

## **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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CEDTICICATION BY HEADOLIADTEDS DESCAPEN FACILITY OFFICIAL





UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 95-F-0001

CUSTOMER NUMBER: 1205

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Tripler Army Medical Center
Dept. Of Clinical Investigation (Mchk-Ci)
Department Of Clinical Investigation
#1 Jarrett White Road, Bldg 40
Tripler Army Hospital, HI 96859

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	В.	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 reason such drugs were not used must be attached to this report	TOTAL NUMBE OF ANIMALS ( COLUMNS C + D + E
4. Dogs				·					
5. Cats									,
6. Guinea Pigs								3	
7. Hamsters				-			1		
8. Rabbits		0		0		10		0	10
9. Non-human Primates								-	
0. Sheep								,	
11. Pigs		0		0		39		0	39
12. Other Farm Animals									
13. Other Animals			-	, ,					
Ferrets		0		0		14	1	0	14

## **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 reserved teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

DATE SIGNED

1NOV OY



See attached form for additional information.

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 95-F-0001 CUSTOMER NUMBER: 1205

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

( TYPE OR PRINT )

Tripler Army Medical Center
Department Of Clinical Investigation (Mchk-Ci)
#1 Jarrett White Road, Bldg 40
Tripler Army Hospital, HI 96859

le Legano

Telephone: (808) -433-7161

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

COPY

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 yused for such purposes.	animals upon which teaching, research, experiments, or tests were conducted	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 reasc 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	-	•			
7. Hamsters					
8. Rabbits	3	0	31	0	<u>3</u> 1
9. Non-human Primates		·			
10. Sheep					
11. Pigs	0	0	7	0	7
12. Other Farm Animals					
Ferrets	0	0	21	0	21
13. Other Animals					
-					

- 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 reserved teaching, testing, surgery, or experimentation were followed by this research facility.
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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL  ( Chief Executive Officer or Legally Responsible Institutional Official )							
CONTROL OF OF O OF MOTEUTIONAL OFFICIAL	I NAME & TITLE OF CIFIO OR INSTITUTIONAL OFFICIAL (Type or Print)	DATE SIGNED					
		23 2000					

APHIS FORM 7023 ( AUG 91 ) (Replaces VS FORM 18-23 (OCT 88), which is obsolete.)