UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

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)

USDA, ARS, Northern Plains Area Roman L. Hruska U.S. Meat Animal Research Cente P.O. Box 166 Clay Center, NE 68933

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

FACILITY LOCATIONS (Sites)

It Headquarters-see #2 above

| EPORT OF ANIMALS USED BY O                              |   | RESEARCH FACILITY  |  | essary or use APHIS FORM 7023A)  E. Number of animals upon which teaching,  | F.                                      |
|---|---|--|--|---|---|
| Animals Covered<br>By The Animal<br>Wellare 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<br>which experiments,<br>teaching, research,<br>surgery, or tests were<br>conducted involving<br>accompanying pain or<br>distress to the animals<br>and for which appropriate<br>anesthetic, analgesic, or<br>tranquilizing drugs were<br>used | 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  (Cols. C + D + E) |
| . Dogs  |   |  |  |   |   |
|   |   |  |  |   |   |
| 5. Cats   |   |  |  |   |   |
| 6. Guinea Pigs  |   |  |  |   |   |
| 7. Hamsters   |   |  |  | 0   | 1                                       |
| 8. Rabbits  |   | 11   | 0  | 0   |   |
| 9. Non-human Primates                                   |   |  |  |   |   |
| 10. Sheep   | 4035  | 9532   | 195  | 0   | 9727                                    |
|   | 6493  | 5763   | 730  | 0   | 6493                                    |
| 11, Pigs  | 0,130   |  |  |   |   |
| 12. Other Farm Animals                                  | 5650  | 17021  | 815  | 0   | 18636                                   |
| Cattle  | 5650  | 17821  | 013  |   |   |
| 13. Other Animals                                       |   |  |  | <u> </u>  | 238                                     |
| Mice  |   | 238  | 0  | 0   | 230                                     |
|   |   |  |  |   |   |
|   |   | ·  |  |   |   |

## **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. In addition to identifying the JACUC-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.

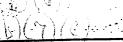
CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

DATE SIGNED







UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 88-F-COOL

FORM APPROVED OMB NO. 0579-0036

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

USDA, Agricultural Research Service 920 Valley Road Reno, NV 89512

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

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)** 

920 Valley Rd., Reno, NV 89512

| A. Animals Covered By The Animal Wellare 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). | TOTAL NO. OF ANIMALS  (Cols. C + D + E) |
|--|---|--|---|--|---|
| 4. Dogs  | 0   | 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  | 0                                       |
| 8. Rabbits   | 0   | 0  | 0   | 0  | 00                                      |
| 9. Non-human Primates                                | 0   | 0  | 0   | 0  | 0                                       |
| 10. Sheep  | 0   | 00   | 00  | 0  | 0                                       |
| 11. Pigs   | 0   | 0  | 0   | 0  | 0                                       |
| 12. Other Farm Animals                               | 0   | 0  | 0   | 0  | 0                                       |
| 4  |   |  |   |  |   |
| 13. Other Animals                                    |   |  |   |  |   |
| angaroo rats   | 0   | 68   | 0   | 0  | 68                                      |
| angaroo Mice   | 0   | 22   | 0   |  | 22                                      |
| ocket mice   | 0   | 17   | 0   | D R O B I J R 3  | 17                                      |
| ASSURANCE STATEMENTS                                 |   |  |   | 110)1  |   |

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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 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).

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL



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

DATE SIGNED

9/22/99

APHIS FORM 7023 (Hep) (AUG 91)

places vs FORM 18-23 (OCT 88), which is obsolete)

