Northeast Ohio
MEDICAL UNIVERSITY

Form #IACUC.003.02
Effective Date: 03/14/2017

| Unique Identifying Number: | 22-ONLINE |
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# NEOMED ANIMAL INCIDENT REPORT

Please use this form to report incidents of non-compliance with appropriate standards of animal care and use, etc. Please return the completed form to the Regulatory Affairs Coordinator, to the IACUC Chair or the IACUC Vice Chair.

You may also choose to call our voicemail number at 330-325-6494. If you wish to anonymize your number, please dial *67 before dialing our voicemail number.

**Any individual, who in good faith, reports an animal welfare concern will be protected against reprisals.**

**YOU MAY CHOOSE TO REMAIN ANONYMOUS.** TO OBTAIN INFORMATION CONCERNING THE OUTCOME OF THIS REPORT, CALL ONE OF THE IACUC CHAIRPERSONS OR THE OMSBUDS OFFICE AND REFER TO THE UNIQUE IDENTIFYING NUMBER LISTED ABOVE.

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| **Date of Incident:** | | **Time of Incident:** | |
| **Animal Species Involved:** | | **Animal Identification:** | |
| **Facility:** | | **Room Number(s):** | |
| **Discovered By:** | | | |

**DESCRIBE INCIDENT (PLEASE BE SPECIFIC AND INCLUDE THE NAMES OF PERSONNEL INVOLVED)**

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**For IACUC Use Only**
**Action taken (specify):**

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