

## University of Puerto Rico Medical Sciences Campus Institutional Animal Care and Use Committee



## ADVERSE EVENT/UNANTICIPATED PROBLEM REPORT FORM

(For use in reporting adverse events or unanticipated problems associated with animal research)

Approved by IACUC on February 22, 2013

PROTOCOL#			
PROTOCOL TITLE:			
PRINCIPAL INVESTIGATOR:			
Investigator's Name	Invest	igator's Signature	Date
IACUC Chairperson's N	Tame IACU	C Chairperson's Signa	ture Date
Adverse Event/Unanticipated Problem Description			
Date of Event/ Problem:		Date Identified:	
Location of Event:			
Is the possibility of this event noted in the current approved protocol?			☐ Yes ☐ No
	nclude dates and details) of		anticipated problem:
2. Provide a description of how this event/problem was managed:			
3. Provide a description of the corrective actions taken to ensure that this type of event/problem does not occur in the future:			

It is UPR/MSC policy that the procurement, housing, care and use of animals should conform to the National Institutes of Health (NIH) Guide for the Care and Use of Laboratory Animals and other relevant federal policies and procedures. The policy applies to all student/faculty research and teaching whether funded from external or internal sources.

Please email this form immediately to <u>frances.candelas@upr.edu</u> or <u>carmen.ramos8@upr.edu</u>