

# Addendum 2

## Protocol Amendment Request

### Missouri State University Institutional Animal Care and Use Committee

Principal Investigator	Dept	Phone
Date	Original Protocol #	

**Title of Project:** \_\_\_\_\_

**Please check the appropriate box(s) and fill in additional information as needed.**

1.  **Change Title to:**
2.  **Change funding source to:**
3.  **Add or delete animal species: If adding species, please justify the additional species.**

Species	Change

**Justification for additional species:**

4.  **Request additional animals:**

Species	Additional Animals Requested	Total Animals Used

**Explain the need for additional animals and the justification for the total requested.**

5.  **Change a procedure**

**Please indicate whether you are adding, deleting, or changing a procedure. Describe the nature of these changes including species, # animals, treatments and drugs, routes of administration, dosages and schedules of drugs (including analgesics and anesthetics), restraining devices, surgical procedures, euthanasia, expected consequences to the animal of treatments or procedures, and alternatives if more than momentary or slight pain will be produced.**

6. Keyword searches are required for protocol amendments when a change or addition of procedures is requested. A new search using the same keywords from the original protocol may be sufficient.

Date of Search	Keywords	Resources Used	Years Covered

Provide results of the search:

7. \_\_\_ Add personnel using live animals in this project:

Name	Title/Position	Degrees	Training/Experience

8. \_\_\_ Delete personnel no longer involved in this project:

Name	Title/Position

\_\_\_\_\_  
Principal Investigator

\_\_\_\_\_  
Date