



F-QMS-005-01

IACUC Request for RBC Services

| Investigator Information | | | |
|--|---|--|--|
| PI Name: | Department: | Department: | |
| Contact Name: | | | |
| Phone: | Email: | Email: | |
| IACUC Information | | | |
| Protocol Number: | Expiration Date: | | |
| Who will run the study Rodent | Behavior Core:□ Your La | b: □ | |
| Mouse Behavior Information Behavioral Tests Required: Conditional/Passive Avoidance Balance Beam Automatic Behavior Recognition Elevated Plus Maze Grip Strength Morris Water Maze Open Field Activity Radial Arm Rotarod Sleep-Wake Activity Monitoring Wire Hang Marble Burying OptoDrum | ☐ Three Chamber Sociability ☐ Y Maze ☐ Hargreaves ☐ Von-Frey ☐ Acetone Test ☐ Brush Test ☐ Pinprick Test ☐ Fear Conditioning ☐ Functional Obs. Battery ☐ Novel Object Rec./Location ☐ Pole Test ☐ Active Avoidance ☐ Pre-pulse Inhibition ☐ Contextual Fear | □ Dynamic Plantar Test □ Dynamic Brush Assay □ Forced Swim Test □ Tail Suspension Test □ Tube Dominance Test □ Abdominal Constriction Test □ Hotplate Test □ Grid Walk □ Light/Dark Box □ Horizontal Ladder □ Basso Mouse Scale □ Barnes Maze □ Smooth/Rough Place Preference Test □ 4-Arm Visual Maze | |
| ☐ Cold Plate Quote request needed? ☐ | Account # | | |
| Current housing location: | | | |

| Please check this box to confirm that any needed transportation to and from the Bio-Pharm building will follow IACUC policies. | | | | | |
|--|---|-------------|---|--|--|
| If your animals are not local transport them. Please use www.research.uky.edu/divi | this service request | form and i | | | |
| Mouse Strain Information | | | | | |
| | E | Backgroun | d: | | |
| Strain: | | F | | | |
| Number of animals being tested: | | | | | |
| Have these animals ever been administered hazardous compounds? Y ☐ N ☐ Rat Behavior Information | | | | | |
| Behavioral Tests Required | i: □ 4-Arm Visual Ma | aze | ☐ Hargreaves Test☐ Hotplate Test | | |
| □Morris Water Maze | ☐ Elevated Plus Maze | • | ☐ Von Frey Test | | |
| Dodiel Arm Weter Maze | ☐ Fear Conditioning☐ Rotor Rod | | ☐ Acetone Test | | |
| □Novel Object Recognition | Rat Strain Inform | mation F | □ Dynamic Brush Test□ Smooth/RoughPlace PreferenceTest | | |
| Strain: | | ' ' | | | |
| Number of animals b | peing tested: | | | | |
| Have these animals ever been administered hazardous compounds? Y ☐ N ☐ | | | | | |

Spiny Mice Behavior Information Behavioral Tests Required: ☐ Open Field Activity ☐ Morris Water Maze ☐ Elevated Plus Maze ☐ Y Maze ☐ Fear Conditioning ☐ Automatic Behavior Recognition ☐ Radial Arm Water Maze ☐ Rotor Rod ☐ 4-Arm Visual Maze □ Novel Object Recognition ☐ Sleep Wake Activity □ OptoDrum Strain: Number of animals being tested: Have these animals ever been administered hazardous compounds? Y \Boxedot \N \Boxedot Will animals be treated with drugs or undergo surgery or post op care while in the RBC? $Y \square N \square$ If yes, please explain: If your animals are transgenic or knockouts, are there any known deficits or strain issues that the RBC staff needs to be aware of? Y N If yes, please explain: Are there any housing/food/health requirements? Y \(\Boxed{\Omega}\) N \(\Boxed{\Omega}\) If yes, please explain: Comments/Questions: