

Institutional Animal Care and Use Committee

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Santa Barbara CA 93106-5062  
[**https://www.research.ucsb.edu/compliance/animal-subjects/**](https://www.research.ucsb.edu/compliance/animal-subjects/)

**Institutional Animal Care and Use Committee**

**Adverse Event/Unanticipated Complication Notification**

**Instructions:**

* Use this form to notify the IACUC of any adverse events or unanticipated problems encountered during the conduct of an approved animal protocol. Complete this form and email it to [iacuc@lifesci.ucsb.edu](mailto:iacuc@lifesci.ucsb.edu). Please refer to the [Provisions of Adequate Veterinary Care Guideline](http://www.research.ucsb.edu/media/18388/ucsbprovisionofadequateveterinarycare.pdf).
* **IMPORTANT NOTE**: Notify the Attending Veterinarian (either via email [manuel.garcia@ucsb.edu](mailto:manuel.garcia@ucsb.edu) or by phone at 805-893-7344) in a timely manner if an animal manifests unexpected or untoward behavior or clinical signs, or dies unexpectedly.

1. **Reporting Individual Information:**

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| **Name**: |  |
| **Phone Number**: |  |
| **Email Address**: |  |

1. **Protocol Information:**

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| --- | --- |
| **Protocol Title**: |  |
| **Protocol Number**: |  |
| **Principal Investigator**: |  |
| **Email Address**: |  |

1. **Adverse Event or Unanticipated Complication Summary:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Incident**: |  | **Time of Incident**: |  |
| **Date & Time Incident was Discovered**: |  | | |
| **Location of Animal Activities (include bldg. and room number)**: |  | | | |
| **Species Involved**: |  | | | |
| **Number of Animals Affected**: |  | | | |

1. **Briefly Describe the Adverse Event or Unanticipated Complication Involving Animals:**

*Include any existing data, reports, extenuating circumstances, or other details that may help further explain the cause(s).*

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1. **Briefly Describe any Corrective Actions Taken:**

*Include any self-corrective actions taken to minimize or avoid future occurrences.*

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