This report is-required by law (7 USC 2143). Failure to report according to the regulations can result in an order to cease and desist and to be subject to penalties as provided for in Section 21!	See attached form for additional information.	Interagency Report Control No.:		
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE	1. CERTIFICATE NUMBER: 21-R-0051 CUSTOMER NUMBER: 389	FORM APPROVED OMB NO. 0579-0036		
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)	State University Of New York School Of Medicine At Buffalo (b)(2)High, (b)(7)f 3435 Main Street Buffalo, NY 14214			
REPORTING FACILITY (List all locations where animals were housed or used in actual research, te	sling, or experimentation, or held for these purposes. Attach a	dditional sheets if necessary)		

FACILITY LOCATIONS (Sites) - See Atached Listing REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY / Attach additional sheets if necessary or use APHIS Form 7023A) ٩. В. C. Number of animal Number of D. Number of animals upon E. Number of animals upon which teaching, experiments, F. being bred. animals upon which experiments, research, surgery or lests were conducted involving conditioned, or which teaching. teaching, research, accompanying pain or distress to the animals and for wh Animals Covered held for use in TOTAL NUMBER research. surgery, or tests were the use of appropriate anesthetic, analgesic, or tranquiliz By The Animal teaching, testing, experiments, or OF ANIMALS conducted involving drugs would have adversely affected the procedures, res Weifare Regulations experiments, tests were accompanying pain or or interpretation of the teaching, research, experiments, research, or conducted distress to the animals an (COLUMNS surgery, or tests. (An explanation of the procedures surgery but not ye used for such involving no pain, for which appropriate producing pain or distress in these animals and the rease C + D + E) anesthetic, analgesic, or distress, or use a such drugs were not used must be attached to this report pain-relieving purposes. tranquilizing drugs were drugs. used. Dogs 0 0 37 0 37 Cats 0 0 0 0 0 Guinea Pigs 0 10 0 0 10 Hamsters 0 187 0 0 187 Rabbits 0 35 81 0 116 Non-human Primates 0 0 0 0 0 Sheep 0 1 34 0 35 Pigs 0 23 198 Ō 221 Other Farm Animals Other Animals Chinchilla 0 58 260 0 318 Ferret 0 7 10 0 17 Gerbil 0 C 3 n **SURANCE STATEMENTS**

1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and following actual rese teaching, testing, surgery, or experimentation were followed by this research facility.

2) Each principal investigator has considered alternatives to painful procedures

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and ap Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report, in addition to identifying the IACUC-approved exceptions, this summary incorrect explanation of the exceptions, as well as the species and number of animals affected.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)

88), which is obsolete

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.t is required by law (7 USC 2:43). Failure to report according to the regulations can in an order to bease and besist and to be subject to penalties as provided for in Section 2.					Interagency Report Control No 0180-DCA-AN		
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE			1. REGISTRAT		APPROVED 0. 0579-0036		
CONTINUATIO	N SHEET FOR	ANNUAL RE	PORT	2. HEADQUAR	TERS RESEARCH FACILITY (Name a	nd Address, as regr	stered with USDA,
OF F	RESEARCH FA	CILITY			,		
	(TYPE OR PRIN	Τ)					
REPORT OF ANIMALS USED BY	OR UNDER CONTROL O	F RESEARCH FACILITY	Altach addilio	nal sheets if neces	ssary or use this form 1		
A.	 B. Number of animals being 	C. Number of animals upon	D. Number o	f animals upon	E. Number of animals upon which te	aching,	F.
Animals Covered By The Animal	bred, conditioned, gr	which teaching,	which experiments, teaching, research, surgery, or lests were conducted involving		experiments, research, surgery or tests were conducted involving accompanying pain or distress		TOTAL NG.
Welfare Regulations	held for use in teaching, testing,	research, experiments, or			anesthelic, analoesic, or transition	se of appropriate	OF ANIMALS
}	experiments,	conducted	distress to	tying pain or the animals	Fave adversely affected the proce interpretation of the teaching result	dures, results, or	(Cols. C +
	research, or surgery but not	involving no pain, distress, or	and for wi enesthetic	uch appropriate :, analgesic, or	experiments, surgery, or tests. (A the procedures producing pain or	n exclanation of	0 + E)
	yet used for such purposes.	use of pain- relieving drugs.	tranquilizi used.	ng drugs were	animals and the reasons such dru must be attached to this report)	gs were not used	
Lion	0	3	0		0		3
Tiger	0	2	0		0		2
							1
			·				
ASSURANCE STATEMENTS							
 Professionally acceptable sta and followion actual records 	inderds governing the care	realment, and use of an	imals, including	appropriate use :	of anesthetic, analgesic, and tranquilizin	a drugs, prior to d	unna
and following actual research 2) Each principal investigator ha			rollowed by the	5 (esearch facility,			
 This facility is achieving to the principal investigator and app 	slandards and regulations roved by the institutional A	under the Act, and it has	required that e mittee (IACUC)	xceptions to the st	andards and regulations be specified at it the exceptions is attached to this a	nd explained by the	
	this research facility has a				If the exceptions is attached to this a t, as well as the species and number of stemmary care and to oversee the adequi- stemmary care and to oversee the adequi- tion.		
	CERTIFIC	ATION BY HEADO	UARTERS	RESEARCH	FACILITY OFFICIAL		7
	(other E)	ve is true	i, correct, and	complete (7 U l	stitutional official) S.C. Section 2143)		
		NAME &	TITLE OF C	E.O. OR INSTI	TUTIONAL OFFICIAL (Type or Pri	at)	DATE SIGNED
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(AUG 31)

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