This report is required by law (7 result in an order to cease and o	USC 2143) Failure to r desist and to be subject	eport according to the to penalties as provide	e regulations can ed for in Section 2150.		See reverse side for additional information.	Interagency Repo 0180-DOA-AN	rt Control No
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. REGISTRATION MO58 23R0058		FORM APPROVED OMB NO 0579-0036	
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				2. HEADOUARTERS RESEARCH FACILITY (Name and Address. as registered with USDA. include Zip Code) Institute for Cancer Research Fox Chase Cancer Center 7701 Burholme Ave. Philadelphia, PA 19111 Status: Active			
3. REPORTING FACILITY (List all 1 sheets if necessary)	locations where animals	were housed or used i	n actual research, testin	ig, leach	ing, or experimentation, or held for t	hese purposes. Alla	ch additional
See Attached		FAC	LILITY LOCATIONS (Sile	s)			
•••							
REPORT OF ANIMALS USED BY O	R UNDER CONTROL OF	RESEARCH FACILITY	 (Allach adiditional she	ets il nec	cessary or use APHIS FORM 7023A)		
A. Animals Covered By The Animal Wellare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or	C Number of animals upon which teaching, research, experiments, or tests were conducted involving no	D. Number of animals which experiments leaching, research surgery, or tests w conducted involvin accompanying pai distress to the anii and to which appi	upon ere g n or nals	E. Number of animals upon which experiments, research, surgery conducted involving accompany to the animals and for which the anesthetic, analgesic, or tranqu have adversely affected the pro- interpretation of the teaching, r experiments, surgery, or tests.	or lests were ying pain or distress e use of appropriate ilizing drugs would cedures, results, or esearch, (An explanation of	F. TOTAL NO OF ANIMALS (Cols. C +
	surgery but not yet used for such purposes.	pain, distress, or use of pain- relieving drugs.	anesthetic, analge tranquilizing drugs used	sic, or	the procedures producing pain animals and the reasons such o must be attached to this report)	drugs were not used	D + E)
4. Dogs	-0-	-0-	-0-		-0-		-0-
5. Cats	-,0-	-0-	-0-		-0-		-0-
6. Guinea Pigs	-0-	-0-	-0-		-0-		-0-
7. Hamsters	-0-	-0-	-0-		-0-		-0-
8. Rabbits	-0-	40	-0-		_0_		40
9. Non-human Primates	-0-	-0-	-0-		-0-		-0-
10. Sheep	-0-	-0-	-0-		-0-		-0-
11. Pigs	-0-	-0-	-0-		-0-		-0-
12. Other Farm Animals						- andda i	
13. Other Animals							
woodchucks	-0-	-0-	30		-0-		30
					l		+
ASSURANCE STATEMENTS					<u> </u>		I
ASSURANCE STATEMENTS	· · · · · · · · · · · · · · · · · · ·						· · · · · · · · ·

1) Prolessionally acceptable standards governing the care, treatment, and use of animals, including approvate use of anesthetic, analges ng di ugs, p and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility. ۰.

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 approved by the 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 includes a brief 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 a Yes rayers any

animal care and use.	Claring Charles Charles Internet
Chief Executive O	HEADQUARTES RESEARCH FACILITY OFFICIAL fficer or Legally Responsible Institutional Official) above is true, correct, and complete (7 USC Section 2143)
	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type of Print) 10/6/99

(Replaces VS FORM 18-23 (OCT 88), which is obsolete)

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