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 2150.

See reverse side for additional information.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

1. REGISTRATION NO. 33-R-0024 **CUSTOMER NO.** 583

FORM APPROVED
OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY *(Name and Address, as registered with USDA, include Zip Code)*

LOYOLA UNIVERSITY CHICAGO
2160 S. FIRST AVE.
BUILDING 120 ROOM 411
MAYWOOD, IL 60153

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional sheets if necessary.)

FACILITY LOCATIONS*(sites)*

(b)(2)High, (b)(7)(F)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY *(Attach additional sheets if necessary or use APHIS FORM 7023A)*

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic,analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. *(An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report)*	F. TOTAL NO. OF ANIMALS (Cols. C + D + E)
4. Dogs		12			12
5. Cats	13		95		95
6. Guinea Pigs			20		20
7. Hamsters	9				
8. Rabbits	21	176	142	1	319
9. Non-Human Primates	1	15			15
10. Sheep					
11. Pigs			6		6
12. Other Farm Animals					
13. Other Animals					
Peromyscus mice			29		29

ASSURANCE STATEMENTS

1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, 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 approved by the Institutional Animal Care and Use Committee (IACUC). **A summary of all the 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 animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional official)
I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL	NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL *(Type or Print)*	DATE SIGNED
(b)(6),(b)(7)(c)	(b)(6),(b)(7)(c)	11/05/2008

APHIS FORM 7023 (AUG 91) **(Replaces VS FORM 18-23 (Oct 88), which is obsolete** **PART 1 - HEADQUARTERS**

NP

APHIS Form 7023 Column E Explanation

This form is intended as an aid to completing the APHIS Form 7023 Column E explanation. It is not an official form and its use is voluntary. Names, addresses, protocols, veterinary care programs, and the like, are not required as part of an explanation. A Column E explanation must be written so as to be understood by lay persons as well as scientists.

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1. Registration Number: 33-R-0024

2/3. Species (common name) & Number of animals used in this study:

Rabbits (1)

4. Explain the procedure producing pain and/or distress.

One rabbit was injected subcutaneously with BGG in complete Freund's Adjuvant. The use of complete or incomplete Freund's Adjuvant is associated with local inflammation which can produce pain/distress.

5. Provide scientific justification why pain and/or distress could not be relieved. State methods or means used to determine that pain and/or distress relief would interfere with test results. (For Federally mandated testing, see Item 6 below)

Immunization in complete Freund's adjuvant has been deemed a category E procedure. We have found this method of immunization to be the most effective for rabbit and we have found immunization with a T cell-dependent antigen to be an effective means of determining whether or not rabbit T cells have been inhibited. This especially important in these experiments where subtle changes in GALT development may occur and it is most important to know how effective the T cell suppression treatment was. Pain relief cannot be administered to the rabbit during immunization due to the anti-inflammatory effects of the analgesics which could modify the immune response (Graham,NM, Journal of Infectious Diseases, 162(6):1277-82,1990 Dec.).

6. What, if any, federal regulations require this procedure? Cite the agency, the code of Federal Regulations (CFR) title number and the specific section number (e.g., APHIS, 9 CFR 113.102):

Agency: CFR: