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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in an order to cease and desist

Interagency Report Control No. 0180-DOA-AN

OMB APPROVED 0579-0036

Fiscal Year. 2009

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

REGISTRATION NUMBER: 33-R-0127

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

Illinois College Of Optometry Department Of Basic And Health Sciences 3241 S Michigan Ave Chicago, IL 60616

Telephone: (312) 949 7188

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

FACILITY LOCATIONS (Sites) See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A.) Number of animals upon experiments, research, surgery, or tests were which experiments, Number of animals conducted involving accompanying pain or distress to the animals and for which the use of Number of animals teaching, research, upon which teaching, research, surgery, or tests were conducted involving being bred, appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely TOTAL NUMBER Animals Covered By The Animal conditioned, or held experiments, or OF ANIMALS accompanying pain or distress to the animals for use in teaching, affected the procedures, results, or interpretation of the teaching, research, Welfare Regulations testing, experiments, conducted involving (Cols. C + D + E) and for which no pain, distress, experiments, surgery, or tests. (An explanation but not yet used for appropriate anesthetic, use of pain-relieving of the procedures producing pain or distress on analgesic, or tranquilizing drugs were such purposes. drugs. these animals and the reasons such drugs were not used must be attached to this report. used. 4. Dogs 5. Cats 38 38 6. Guinea Pigs 7. Hamsters 8. Rabbits 9. Non-human Primates 10. Sheep 11. Pigs 12. Other Farm Animals 13. Other Animals ASSURANCE STATEMENTS

- 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.
- 2.1 Each principal investigator has considered alternatives to painful procedures.
- This facility is adhering to the standards and regulations under the Aci, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator This facility is adhering to the standards and regulations under the Act, and it has required that 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.
- The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and 4.)

	(b)(6) (b)(7)c	CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL Executive Officer (C.E.C.) or Legally Responsible Institutional Official (I.O.)) pertify that the above is true, correct, and complete (T.U.S.C. Section 2143).			
SIGP		NAME AND TITLE OF C.E.O. OR I.O. (Type or Print)	DATE	DATE SIGNED	
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APHIS FORM 702 AUG 2009	23		RECE	IVE	

APHIS Form 7023 Site Addendum for FY: 2009

Registration Number: 33-R-0127 Customer ID Number: 11541

Facility Business Address Information:

Illinois College Of Optometry Department Of Basic And Health Sciences 3241 S Michigan Ave Chicago, IL 60616

Telephone: (312) 949 7188

Facilities Site(s) Address Information:

Site Code(s):

001 Department Of Basic And Health Sciences 3241 S Michigan Ave Chicago, IL 60616 Assigned Inspector: Kenneth Kirstein, D V M

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