## Research Facility Protocol Selection Worksheet

Legal Name: Unive	ersity of Illinois			
Customer Number	er; 603	Certificate Number: 33-	-R-0029	Site Number: 001
Inspection Date:	02/08/2022			
Inspection Type:	Routine	Focused (list areas inspected)	subset of ar	nimals and records
Inspector:				

Reasons Pr	rotocols Were Selected for Review :	How Many Protocols Were Selected	
1. Pro	otocols identified during inspection of concern (select all)	2	
2. Col	lumn E protocols ( select all)	0	
	otocols with IACUC-approved exemptions/exceptions	0	
Protocols cited as noncompliant and not corrected during the last inspection (select all)		0	
a.	ditional Protocols Selected:  If <5 remaining protocols, select all remaining:  If >5 remaining protocols, select 5 additional protocols:  1) Protocol for each regulated species and/or,  2) Protocols involving high risk procedures (see Chapter 7, Animal Welfare Inspection Guide for guidance):	0 1	
Total	Protocols Selected and Reviewed	2	

<sup>\*</sup>Note: Protocol selection guidance applies to protocols which have been initially approved, or have had significant changes approved, since the last inspection. For protocols reviewed by an Animal Care Veterinary Medical Officer within the last year, professional judgment should be used in determining whether another review is necessary.

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