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.						OMB APPROVED 0579-0036 Exp.: 10/31/2018	
This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result in and to be subject to penalties as provided for in Section 2150.				e and desist	Interagency Report Control No. 0180-DOA-AN	Fiscal Year 2016	
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE				1. REGISTRATION NUMBER 52-R-0011			
				ERS RESEARC DUSDA, include	H FACILITY (Name, address, and to ZIP Code)	ephone number as	
ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)			PO BOX 40 OFFICE OF CHARLOT	UNIVERSITY OF VIRGINIA PO BOX 400301 OFFICE OF THE VICE PRESIDENT FOR RESEARCH CHARLOTTESVILLE, VA 22904			
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)							
REPORT OF ANIMALS USE 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.	<ul> <li>(Attach additional sheets, if necess</li> <li>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.</li> </ul>	E. Number of experime conducte distress t appropria tranquiliz affected interpreta experime of the pro these an	HIS FORM 7023A.) of animals upon which teaching, nts, research, surgery, or tests were d involving accompanying pain or o the animals and for which the use te anesthetic, analgesic, or ing drugs would have adversely he procedures, results, or tition of the teaching, research, nts, surgery, or tests. (An explanatic cedures producing pain or distress imals and the reasons such drugs used must be attached to this report	of TOTAL NUMBER OF ANIMALS (Cols. C + D + E)	
4. Dogs	0	0	0	were not	0	0	
5. Cats	0	0	0		0	0	
6. Guinea Pigs	0	0	0		0	0	
7. Hamsters	18	0	0		0	0	
8. Rabbits	17	14	0		0	14	
9. Non-human Primates	0	0	0		0	0	
10. Sheep	0	0	0		0	0	

## ASSURANCE STATEMENTS

11. Pigs

12. Other Farm Animals

13. Other Animals

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.

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2.) Each principal investigator has considered alternatives to painful procedures.

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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 provisions 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 (C.E.O.) or Legally Responsible Institutional Official (I.O.))
I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).

DATE SIGNED

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