| it displays a valid OMB contro collection is estimated to ave | ol number. The valid OMB con | ntrol number for this information cluding the time for reviewing | on collection is | 0579-0036. The ti | me required to | collection of information unless complete this information nering and maintaining the data | 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 resul and to be subject to penalties as provided for in Section 2150. | | | | in an order to cease and desist | | Interagency Report Control No. 0180-DOA-AN | Fiscal Year 2017 | |
| UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE | | | | 1. REGISTRATION NUMBER 21-R-0109 | | | | |
| | | | | HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code) | | | | |
| ANNUAL REPORT OF RESEARCH FACILITY | | | | UNIVERSITY OF ROCHESTER | | | | |
| (TYPE OR PRINT) | | | | 601 ELMWOOD AVENUE PO BOX 706 | | | | |
| | ROCHESTER, NY 14642 | | | | | | | |
| | List all locations where animal | s were housed or used in actu | ual research, te | esting, teaching, or | experimentation | n, or held for these purposes. Attach a | lditional sheets, if | |
| necessary.) | | F/ | ACILITY LOCA | ATIONS (Sites) | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | D BY OR UNDER CONTROL | | Attach additio | nal sheets, if neces | sary, or use AP | HIS 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. | which e teaching surgery conduct accomp distress and for appropr analges | iate anesthetic, | experime conducte distress appropri- tranquiliz affected interpreta experime of the pri- these and | of animals upon which teaching, ints, research, surgery, or tests were id involving accompanying pain or o the animals and for which the use of ate anesthetic, analgesic, or ing drugs would have adversely the procedures, results, or ation of the teaching, research, ents, surgery, or tests. (An explanation ocedures producing pain or distress on imals and the reasons such drugs used must be attached to this report.) | F. TOTAL NUMBER OF ANIMALS (Cols. C + D + E) | |
| 4. Dogs | 0 | 0 | 0 | | | 0 | 0 | |
| 5. Cats | 0 | 2 | 19 | | | 0 | 21 | |
| 6. Guinea Pigs | 0 | 1 | 0 | | | 0 | 1 | |
| 7. Hamsters | 0 | 0 | | 0 | | 0 | 0 | |
| 8. Rabbits | 0 | 42 | | 41 | | 0 | 83 | |
| 9. Non-human Primates | 22 | 36 | | 58 | | 0 | 94 | |
| 10. Sheep | 0 | 0 | 3 | | | 0 | 3 | |
| 11. Pigs | 0 | 0 | 6 | | | 0 | 6 | |
| 12. Other Farm Animals | | | | | | | | |
| | | | | | | | | |
| 13. Other Animals | 370 | 320 | | 0 | | 0 | 320 | |

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 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 07-FEB-2018

| 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 and to be subject to penalties as provided for in Section 2150. Interagency Report Control No. 0180-DOA-AN | | | | | | | Fiscal Year 2017 | |
| UNITED ST ANIMAL AN | | 1. REGISTRATION NUMBER 21-R-0109 2. HEADQUARTERS RESEARCH FACILITY (Name, address, and telephone number as registered with USDA, include ZIP Code) UNIVERSITY OF ROCHESTER 601 ELMWOOD AVENUE PO BOX 706 ROCHESTER, NY 14642 | | | | | | |
| CONTINU REPOR | | | | | | | | |
| REPORT OF ANIMALS USE | D BY OR UNDER CONTROL | OF RESEARCH FACILITY | (Attach additio | onal sheets if necess | sary or use this f | form.) | | |
| 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. | which e teachin surgery conduc accomp or distr animals which a anesthe | ery, or tests were ucted involving mpanying pain trees to the als and for a ppropriate thetic, analgesic, or uilizing drugs were integrated the procedures of the procedures producing pa or interpretation of the teaching experiments, surgery, or tests. of the procedures producing pa or interpretation and the reaction or interpretation of the teaching or interpretation of the teaching pa or these animals and the reaction | | ents, research, surgery, or tests iducted involving accompanying istress to the animals and for | (Cols. C + D + E | |
| GERBILS | 41 | 287 | 0 | | | 0 | 287 | |
| PRAIRIE VOLES | 131 | 0 | 0 | | 0 | | 0 | |
| BLIND MOLE RATS | 12 | 0 | 0 | | 0 | | 0 | |
| NAKED MOLE RATS | 186 | 33 | | 0 | | 0 | 33 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| ASSURANCE STATEMENTS | S | | | | | | | |

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 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 07-FEB-2018 | | | | | | | | | |