



## IACUC Participant Training Logs

The Guide and federal regulations require documentation of the qualifications and training of individuals working with animals. Required training regarding the humane use of animals in research and teaching (“Level II Training”) and baseline occupational health and safety information (“Occupational Hazards Associated with the Care and Use of Laboratory Animals”) is provided by the IACUC. Historically, documentation regarding an individual’s training and experience pertinent to the *Proposal*, *i.e.*, **species- and procedure-specific training**, was provided in the *Proposal* form itself by listing for all participants: 1) their role on the study, *i.e.*, the procedures each participant is expected to perform, and 2) training and experience preparing each individual for that role/procedure. The IACUC acknowledges that this often-arduous task yielded significantly inconsistent results and provided little assurance that individuals have or will gain the proficiency needed to complete animal-related procedures. *It therefore adopted a scheme whereby the individual participant will share the responsibility of documenting prior as well as newly-received experience and training pertinent to the procedures they have or will perform.*

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### Policy (“Required Training”) Excerpts

1. As a condition for continued authorization to work with animals, individual animal users are expected to maintain an IACUC Participant Training Log that outlines training on all procedures for which they are expected to perform.
2. To document procedure-specific training, each animal user must maintain an IACUC Participant Training Log. This Log should describe prior experience for which specific procedure proficiency was obtained and outline each newly acquired training. IACUC Participant Training Logs must be made available to the IACUC upon request.
3. *Principal Investigators are responsible for ensuring that training is obtained and documented **prior** to a Participant performing any animal-related procedures unsupervised.* Participants conducting procedure for which the Log does not record an appropriate level of training may also lose animal use privileges.

### The Process

1. Each laboratory participant, *including the PI*, must complete a Participant Training Log. Except for personnel new to the use of animals, the IACUC expects that the text box describing prior experience will be extensive. Training and experience should be species-specific. *All newly-obtained training should be documented, including a brief description of how that training was obtained and by whom.*
  2. An electronic form is available at: <https://louisville.edu/research/iacuc/training/participant-training-log>. A copy of this Excel spreadsheet should be retained by the individual and emailed to the IACUC Office at [IACUC@louisville.edu](mailto:IACUC@louisville.edu).
  3. *A hard copy of the completed form must be made available for each individual at Semi-Annual Laboratory Inspections or upon request by the IACUC or CMRU.*
  4. As noted in IACUC Policy, PIs must ensure that adequate training is documented. ***Any participant performing a particular procedure without documented pertinent experience in a Training Log would be considered in non-compliance with this policy.***
  5. Although not required for use or intended to be exhaustive, example species and procedures lists are provided in the following pages.
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### Example Species:

Small rodent (mouse, rat, hamster)	Ferret	Fish
Large rodent (guinea pig)	Cat	Amphibian
Cotton rat	Dog	Reptile
Wild rodents	Swine	Other
Rabbit	Small ruminant (calf, sheep, goat)	

### Example Procedures:

#### **Basic Handling and Observation**

Handling, weighing, manual restraint  
Behavioral observation; recognition of potential pain and/or distress  
Dental examination (teeth, gum recessions, socket depth, *etc.*)

#### **Sample / Tissue Collection**

Urine, feces  
Blood – open method (vein stick)  
Blood – closed method (venous cannulation)  
Blood – intracardiac  
Retro-orbital sinus/plexus  
Tail snip (for genotyping)  
Gut contents

#### **Agent Administration**

IP, IM, or SC injection  
IV injection  
Oral administration  
Gavage  
Ocular administration (drops)  
Ocular injection  
Intracranial/intrathecal injection  
Epidural injection  
Intranasal  
Footpad injection  
Inhalation exposure  
Intratracheal instillation (endotracheal)  
Intracardiac injection  
Cardiac injection (closed approach)  
Pulmonary injection (closed approach)  
Abdominal organ (closed approach)  
Retro-orbital sinus/plexus injection

#### **Animal Identification**

Tattoo  
Toe tattoo  
Ear punch or tag  
Toe clipping

#### **Anesthesia**

Open-drop method (“bell-jar”)  
Face mask induction or use of induction chamber  
Intubation  
Ventilator use  
Anesthetic monitoring (depth of anesthesia, vital sign monitoring)  
Anesthetic recordkeeping

#### **Imaging**

Radiography (X-ray, fluoroscopy)  
Micro-PET  
Ultrasound  
Luminescence

#### **Survival Surgery - CNS**

Stereotaxic injection or other manipulation  
Traumatic brain injury or other brain manipulation  
Spinal cord injury or other manipulation (includes [hemi]laminectomy)  
Post-surgical or procedural monitoring

#### **Survival Surgery - PNS**

PNS surgery/manipulation  
Post-surgical or procedural monitoring

#### **Survival Surgery - Abdominal**

Cecal puncture  
Implant placement  
Liver or bile duct surgery/manipulation  
Orthotopic injections or implantation (open approach)  
Ovariectomy/orchiectomy  
Pancreatic surgery/manipulation  
Urinary system (kidney, bladder) surgery/manipulation  
Intestinal resection/anastomosis  
Laparoscopy  
Other GI surgery/manipulation (closed approach; *e.g.* endoscopy)  
Post-surgical or procedural monitoring

**Survival Surgery - Thoracic**

Thoracic approach (open) via intercostal incision  
Thoracic approach (open) via sternotomy  
Cardiac surgery/manipulation (open approach)  
Cardiac surgery/manipulation (closed approach; *e.g.* cardiac catheterization)  
Pulmonary surgery/manipulation  
Post-surgical or procedural monitoring (cardiac surgery / manipulation)  
Post-surgical or procedural monitoring (pulmonary surgery / manipulation)

**Survival Surgery - Ocular**

Corneal surgery/manipulation  
Intraocular surgery/manipulation

**Survival Surgery - Orthopedic**

Orthopedic surgery/manipulation  
Post-surgical or procedural monitoring

**Survival Surgery - Oral**

Tooth extraction  
Post-surgical or procedural monitoring and care

**Survival Surgery - Cutaneous**

Skin wound  
Subcutaneous implantation (surgical)  
Post-surgical or procedural monitoring and care

**Survival Surgery - General**

Surgical site/field preparation  
Post-surgical or procedural monitoring and care

**Survival Surgery – Other**

Subcutaneous implant  
Peripheral vascular cannulation  
Central vascular cannulation  
Intratracheal instillation – tracheostomy  
Nasal or sinus surgery/manipulation  
Post-operative monitoring and care

**Special Health Monitoring**

Diabetes mellitus  
Infectious disease  
Irradiation  
Neoplasia – internal/metastasis  
Neoplasia – subcutaneous  
Peripheral nervous dysfunction  
Central nervous dysfunction  
Respiratory dysfunction  
Vaccine / adjuvant use

**Euthanasia**

CO<sub>2</sub> and confirmation of death  
Cervical dislocation (without sedation or anesthesia)  
Decapitation (without sedation or anesthesia)  
Anesthetic overdose and confirmation of death  
Anesthesia / chemical use (*e.g.*, KCl)  
Anesthesia / exsanguination  
Anesthesia / vital organ removal

