

University of Southern Maine
Office of Research Integrity and Outreach
Institutional Animal Care and Use Committee (IACUC) - Adverse Event Report

<<Timestamp>>

Primary Investigator (PI) Name: <<Primary Investigator (PI) Name>>

PI Organization: <<PI Organization>>

PI Phone: <<PI Phone>>

PI Email: <<PI Email>>

Study Title: <<Study Title>>

IACUC Protocol Number: <<IACUC Protocol Number>>

Current status of the project is: <<Current status of the project is>>

Adverse Event

Date(s) of incident: <<Date(s) of incident>>

List the names of any research staff involved in the incident: <<List the names of any research staff involved in the incident>>

List the procedure(s) involving animals in the incident: <<List the procedure(s) involving animals in the incident>>

Provide a detailed description of the incident and it's outcome: <<Provide a detailed description of the incident and it's outcome>>

I certify that the above is a true account of the adverse event: PI Signature: <<PI Signature>>

How easy was it to use this Google Form?: <<How easy was it to use this Google Form?>> 1= Difficult
5=Easy

Any comments about the use of this Google Form?: <<Any comments about the use of this Google Form?>>