

**Amendment Request**

# Section 1: Overview

**1.1. Project Title:**

**1.2. ACEC Number:**

**1.3. Name of Chief Investigator:**

**1.4. Provide a brief lay description of the original project, its aims and progress to date.** *Note if the Aims of the project have changed, do not continue with this form as you must submit a new application.*

**1.5. Indicate the nature of the amendment**

*Mark all relevant amendment types. Sections 1 and 8 must be completed for all amendment types. Sections 2 – 7 should only be completed when relevant.*

Change to the Research Team – *Complete Section 2*

Add student / investigator/professional staff

Remove student / investigator/professional staff

Change in animal numbers and/or animal species – *Complete Section 3*

Change of procedure/protocol – *Complete Section 4*

Extension of study duration – *Complete Section 5*

Approve a New/Revised Standard Operating Procedure (SOP) – *Complete Section 6*

Other, Please specify: – *Complete Section 7*

**1.6. Considering the original aims of the project, provide the reason/s and justification/s for this amendment.**

|  |  |
| --- | --- |
| **1.7. List all previously approved amendments**  *Approved Amendments will be listed on the 2nd page of your most current ARA* | |
| **Approval Date** | **Amendment Description** |
|  |  |
|  |  |

# Section 2: Changes to the Research Team

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2.1. Adding a person to an approved protocol** *Note: Insert a copy of this box below for each additional person*  2.1.1. Detail experience and/or relevant qualifications of new person: Click here to enter text.  2.1.2. Name: Click here to enter text. 2.1.3. E-mail address: Click here to enter text.  2.1.4. School/Institute/Organisation: Click here to enter text.  2.1.5. Work phone: Click here to enter text. 2.1.6. After hours phone: Click here to enter text.  2.1.7. Indicate the role of this person in the project: Click here to enter text.    (Indicate with X)  Western Sydney U Student  Western Sydney U Investigator  Western Sydney U Professional Staff  Non- Western Sydney U Student  Non- Western Sydney U Investigator  -------------------------------------------------------------- -------------------------------  Signature of new team member Date | | | | |
| **2.2. Technical Competency: for each new person to be added, complete the table below.**  *Note: Copy and paste the table as required. Insert rows as required* | | | | |
| **Name of Investigator:** | | | | |
| **Procedures**  (including but not limited to surgery, anaesthesia, euthanasia, capture methods) | **Species Involved** | **Current experience and/or training required**  (Must include number of animals/procedures successfully performed, and the date this was last carried out if applicable) | **Investigator Competent or Not Yet Competent?** | **Date Achieved Competency** |
|  |  |  | Choose an item. | Click here to enter a date. |
|  |  |  | Choose an item. | Click here to enter a date. |

**2.3. Remove a person from an approved protocol.** *Note: Insert a copy of the box for each additional person*

Name: Click here to enter text. School/Institute/Organisation: Click here to enter text.

# Section 3: Change of animal species and/or numbers

**3.1.** Are there any **animals** no longer required for this project?  Yes  No

**3.2.** Are additional **animal numbers or species** requested?  Yes  No

**3.3.** Explain why additional animals are required (*e.g. lower than expected fertility rates*).

Click here to enter text.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Species / Strain**  Insert rows for additional species. | **Species category** | **Total number of animals approved**Enter not applicable (NA), if a new species. | **Change in animal numbers** Indicate with + or – if this is additional or reduction. | **Total animals required for project** |
| ***e.g. Mouse abc*** | ***01*** | ***100*** | ***+ 50*** | ***150*** |
| ***e.g. Mouse xyz*** | ***01*** | ***NA*** | ***+ 100*** | ***100*** |
| ***e.g. Rat - Long Evans*** | ***02*** | ***20*** | ***- 20*** | ***0*** |
|  |  |  |  |  |
|  |  |  |  |  |

# Section 4: Change of procedure/protocol – impact assessment

**4.1.** Describe how this proposed amendment may impact on the animals involved. Anticipate and describe any potential adverse effects and the steps you will take to avoid, minimize or manage these effects.

**4.2.** Justify why the proposed amendment is required.

**4.3.** Attach any additional information or references, as required to support your amendment request to the ACEC.

**4.4.** A revised ACEC application with the proposed changes highlighted using track changes has been attached to assist in the review process.  Yes  No

**4.5.** Monitoring – Will animal monitoring continue as previously indicated or not?  Yes  No

*If No*, provide an updated animal monitoring sheet with this amendment request.

# Section 5: Extension of study duration (Not more than 1 year)

Note: For an amendment, the maximum extension of time is one (1) year and the total approval time cannot be more than three (3) years. If a project needs to continue further than 3 years, a new application is required.

**5.1.** Current Approval Expiry Date: Click here to enter a date. **5.2.** Requested Expiry Date: Click here to enter a date.

If not sure see – [Western Sydney University Researcher Portal](https://research-report.uws.edu.au/wpubs/Portal.asp)

# Section 6: Approval of a new or revised Standard Operating Procedure (SOP)

|  |
| --- |
| **6.1.** Approval is sought for -  New SOP  Revised SOP  **6.2.** Title and version of SOP:  **6.3.** Expiry Date: Click here to enter a date. |

# Section 7: List any other changes

|  |
| --- |
| **7.1.** Describe the nature of the change (eg. change of description of a teaching unit) |

# Section 8: Declaration of Chief Investigator

All the details provided in this amendment request are correct and I agree to ensure that any changes will not be implemented until a revised Animal Research Authority has been issued.

I have reviewed the details of the approved ACEC Application for this project and I confirm:

That the aims of the project are unchanged.  Yes  No

That any required licences remain current.  Yes  No

That the Purpose category for this project is unchanged.  Yes  No

That the Procedure category for this project is unchanged.  Yes  No

That no person participating in the project has had any Animal Research Authority

or Animal Supplier’s Licence cancelled  Yes  No

I am familiar with the NSW Research Act and the Regulation, the *Australian code of practice for the care and use of animals for scientific purposes* 8th Edition and that under my responsibilities as set out in these documents,

I accept responsibility for the conduct of the project as outlined in the approved application and this amendment request.

I accept responsibility for ensuring that each person involved in this project has the level of experience, skill and training appropriate for their role in this project. Where there are any gaps, I undertake to address the issue.

I confirm that there are adequate resources available to conduct this project.

I confirm that all the persons involved in this project have access to the approved application, any amendments and related correspondence with the ACEC.

If confirm that all other persons involved with this project have received or have access to a copy of this application, and will receive a copy of any associated correspondence or documentation from the ACEC

Name of Chief Investigator: Click here to enter text.

Signature: Date: Click here to enter a date.

Forward to the Animal Ethics Officer – [animalethics@westernsydney.edu.au](mailto:animalethics@westernsydney.edu.au)