# Animal Welfare Incident Report Form

In accordance with the Cape Breton University Animal Care Committee Terms of Reference an Animal Welfare Incident Report Form must be submitted electronically to the Animal Care Coordinator if an unexpected incident results in mortality and/or compromises 20% of the population, or is above the baseline mortality outlined, justified, and approved in the animal use protocol.

The CBU Consulting Veterinarian must be notified within 24 hours of the incident. The Animal Welfare Incident Report Form must be submitted to the ACC within one (1) week of the incident.

Questions about incident reporting and submission of incident report forms can be sent to [Jared\_walters@cbu.ca](mailto:Jared_walters@cbu.ca).

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| Section 1: General Information |
| **AUP protocol number and title**:Click or tap here to enter text.  **Date**:Click or tap here to enter text.  **Date and time of the incident**:Click or tap here to enter text.  **Incident reported by (name and title**):Click or tap here to enter text.  **Has the consulting veterinarian been notified?** Click or tap here to enter text. |

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| Section 2: Animals Affected | | |
| **List the number and species of animals involved in the incident. If animals were affected in different ways, you can have more than one row per species:** | | |
| Species | Total number of animals affected | Description of how animals were affected |
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| **Please provide additional information on the number of animals affected here if needed:**  Click or tap here to enter text. | | |

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| Section 3: Description of the Incident |
| **Please provide a description of the events leading up to the animal welfare incident.**  Click or tap here to enter text.  **Please describe the cause (if known) of the animal morbidity and/or mortality.**  Click or tap here to enter text.  **If cause is unknown, clarify how cause will be determined.**  Click or tap here to enter text. |

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| Section 4: Corrective Actions |
| **Was immediate corrective action taken? If so, please describe the actions taken to mitigate the conditions causing the incident.**  Click or tap here to enter text.  **Please provide corrective actions planned to prevent incident in the future. Indicate a timeline and who will be involved. What additional corrective measure will be implemented to prevent future mortality incidents? (Changes to SOPs, procedures, equipment, etc.)**  Click or tap here to enter text. |

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| Section 5: Declaration and Signature |
| **By signing below, I certify that all the information given here to be accurate and true and that all necessary actions have been taken as per the CBU ACC Policy for Reporting Animal Welfare Incidents. I also acknowledge that this report will be filed with the applicable Animal Use Protocol.**  Email form to ACC coordinator [Jared\_walters@cbu.ca](mailto:Jared_walters@cbu.ca) |