



University Animal Care Committee (UACC)

Schedule 5: Behavioral Experiments

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| 1 List the behaviors which will be performed. | |
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| 2 Please describe the procedure for each behavior. | |
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| 3 If behavior is painful or stressful, describe the analgesic and/or anesthetic used. | |
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| 4 Will the procedure have any negative effects on the animal? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, describe. (Note if negative reinforcement or punishment involves pain, "Schedule 2" must be attached) | |
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| 5 Will the procedure have any negative effects on the animal? (For example, because of pain or discomfort.) | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 5.1 If YES, how will you minimize the effects? | |
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| 6 Is an individual's behavior affected by the environment? (For example, does the environment affect your exercise habits?) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 6.1 If YES, how is the environment affecting you? (For example, does the environment affect your exercise habits?) | | |
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7 Are you a member of any organizations?