Rodent Transfer Report (Version 2)

Education and Research Center of Animal Models for Human Diseases
-FUJITA HEALTH UNIVERSITY-

<u>Request for Animal Health Information for Rodent Importation</u>

A. Species, strain and/or genotype of animals to be distributed

_____

□knock out   □knock in   □transgenic   □spontaneous mutant   □immunodeficiency

1. Health Report (microbiological examination report)

B. Which animals are you describing in this health report?
    □ All animals in the facility
    □ Only animals in the room where the animals to be distributed are currently housed

C. What kind of microbial pathogens are monitored? Please put marks into the list below.

□ Mice

□ Mouse hepatitis virus (MHV)
□ Sendai virus (HVJ)
□ Ectromelia virus
□ Lymphocytic chromeningitis virus (LCMV)
□ Mycoplasma pulmonis
□ Clostridium piliforme (Tyzzer's organism)
□ Corynebacterium kutscheri
□ Salmonella spp.
□ Pasteurella pneumotropica
□ Citrobacter rodentium
□ Ecto parasites (□ Fur mites, □ other)
□ Endo parasites (□ Protozoa, □ Pinworm)

□Rats

□ Sialodacryoadenitis virus (SDAV)
□ Sendai virus (HVJ)
□ Mycoplasma pulmonis
□ Clostridium piliforme (Tyzzer's organism)
□ Hanta virus
□ Corynebacterium kutscheri
□ Salmonella spp.
□ Pasteurella pneumotropica
□ Streptococcus pneumoniae
□ Bordetella bronchiseptica
□ Ecto parasites (□ Fur mites, □ other)
□ Endo parasites (□ Protozoa, □ Pinworm)

If you have other pathogens to be monitored, please describe.

_____

D.   How often your microbiologic monitoring is performed?
     □ 12 times / year
     □ 4 times / year
     □ less than 4 times / year
     □ Other
   * If you have other patterns of frequency, please describe.

_____

E. What kind of animals do you select as the monitoring subject?
     □ Sentinel animals
       (housed in □same cage, □same rack, □same room, □same area of the animals to be distributed)
       Please describe the detailed procedure and period of monitoring.

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     □ Random sampling animals
       (housed in □same cage, □same rack, □same room, □ same area of the animals to be distributed)
       Please describe the detailed procedure and period of monitoring.

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2. Housing Conditions

F. Do you have any positive result(s) of viral, bacterial, or parasitological monitoring test somewhere in the current facility in last 12 months?   □ Yes   □ No
   If yes, please describe details.

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G. Do you have any positive result(s) of viral, bacterial, or parasitological monitoring test in the current room with the animals to be distributed in last 12 months?   □ Yes   □ No
   If yes, please describe details.

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H. Do you have a quarantine program for imported rodents from the university or institute (except reliable commercial breeder e.g.: Charles River Laboratories)?   □ Yes   □ No
   If yes, please describe a brief summary or provide a copy of standard operating procedure for your health monitoring program.

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   If no, please describe the reason why you do not have a quarantine program.
     □ All rodents are cleaned by the fertilized egg method before bringing to the breeding room.
     □ Current facility has a place to quarantine with a method other than the above (Please describe detailed procedure below).

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I. Do you keep animals to be distributed in the same room with other animals obtained from other university or institute (except reliable breeders)?

    □ Yes   □ No

3. Animals to be distributed

J. Please select current housing conditions of animals to be distributed
    □ Barrier-SPF
      (e.g.: air-conditioning system with a high-performance filter, use of sterilized apparatus and materials,
          use of completely sterilized boots, mask and gown, restricted access)
    □ Quasi-SPF
      (e.g.: air-conditioning system with a high-performance filter, use of sterilized apparatus and materials,
          with clean lab coat, restricted access)
    □ Conventional (e.g.: use of unsterilized apparatus and materials, open cages, non-restricted access)
    □ Other (Please describe details.)

_____

_____

K. Please mark the current usage of clean apparatus for the rodents to be distributed.
    □ Micro isolator cage
    □ Filter top cage
    □ Clean rack
    □ One-way air flow system
    □ Other (Please describe below)

_____

L. Do you sterilize apparatus and materials (including food, water, and wooden chips) by using appropriate
    sterilization agent and equipment in the current facility?
    □ Yes   □ No

M. Do you keep other species in the same room in the current room?
    □ Yes   □ No

N. Do you breed other species in the same room in the current room?
    □ Yes   □ No

3. If you have any comment about animals to be distributed, please describe below.

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Name and signature of the respondent

1. Name of the responsible staff

   Printed _____ Signature _____

   TEL _____

   FAX _____

   E-mail _____

2. Name of the facility director

   Printed _____ Signature _____

   TEL _____

   FAX _____

   E-mail _____

3. Date of this report _____