Brandon University Animal Use Protocol  
Schedule 3  
Field Study

Please save this file to your computer. Applicants are required to complete **all** sections and submit electronically to the Research Ethics Officer at [buacc@brandonu.ca](mailto:buacc@brandonu.ca).

All sections in this form will expand as necessary. Questions about using the form should be directed to Shannon Downey, Administrative Officer to the Vice-President (Academic & Provost) and Research Ethics Officer, at (204) 727-9**712** or [downeys@brandonu.ca](mailto:downeys@brandonu.ca).

**Please note: the CCAC Guidelines on the Care and Use of Wildlife (2003) is available at** [**http://www.ccac.ca/Documents/Standards/Guidelines/Wildlife.pdf**](http://www.ccac.ca/Documents/Standards/Guidelines/Wildlife.pdf)**. This reference contains information on handling, restraint methods (both physical and chemical) and medical/surgical procedures pertinent to wild species.**

ANIMAL CAPTURE

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Will this study involve the capturing of wild animals?** | | **Yes** | **No** |
| **If NO, skip to next section. NOTE: If any field procedures are intended to test or alter animal behaviour, please complete and attach Schedule 7.**  **If YES, provide details on the following, including explanations on the appropriateness of these procedures:** | | | |
| 1. **Pursuit:** |  | | |
| 1. **Capture:** |  | | |
| 1. **Housing:** |  | | |
| 1. **Handling and Restraint:** |  | | |
| 1. **If traps are to be used, please specify:** | | | |
| 1. **Type of trap:** |  | | |
| 1. **Potential for injury from the trap:** |  | | |
| 1. **Monitoring frequency:** |  | | |
| 1. **Indicate what will be done to minimize stress due to capture, handling, or other experimental procedures. Please also specify the provisions for recovery, treatment or euthanasia of injured animals.** | | | |
| 1. **For collection of killed animals, what method of killing will be used? (e.g. details on killing by collection gear or method of euthanasia).** | | | |

WILD ANIMALS IN CAPTIVITY

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. **Will wild animals be held in captivity?** | | | | **Yes** | | **No** |
| **If NO, skip to next section.**  **If YES, complete the following for each species:** | | | | | | |
| **Species** | **Method and Duration of Transport** | **Duration in Captivity** | **Location of Housing** | | **Special Housing Instructions** | **Special Feeding Instructions** |
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| ***Wild animals carry a natural/pathogen load normally kept in check by their immune system. Capture stress can cause these to go from subclinical to clinical. There is also risk of wild animals acquiring infections from resident animals in the facility, or of their transmitting an infection to resident animals in the facility. Isolation of wild animals from resident animals is an important consideration.*** | | | | | | |
| 1. **Describe any special handling instructions that will be necessary. NOTE: If the animals are hazardous or carry a significant risk of zoonotic disease, please complete and attach Schedule 6.** | | | | | | |
| 1. **Are predator-prey relationships being studied, or are they required for maintenance of the species being studied (such as snakes)?** | | | | **Yes** | | **No** |
| **If YES, how will distress to the prey be minimized?** | | | | | | |

IDENTIFICATION OR TRACKING OF WILD ANIMALS

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| --- | --- | --- | --- | --- | --- |
| 1. **Will means of identification or radio telemetry devices be implanted or attached to animals?** | | | **Yes** | | **No** |
| **If NO, skip to the next section.**  **If YES, complete the table below:** | | | | | |
| **Type of Mark, Tag or Band** | **Location & Means of Attachment** | **Type of Telemetry Device** | | **Location & Means of Attachment** | |
|  |  |  | |  | |
|  |  |  | |  | |
| **NOTE: If surgery is required to implant a radio telemetry device or tag, please complete and attach Schedule 10.** | | | | | |
| 1. **Will it be necessary to replace tags, bands, etc. to allow for growth of the animal, or to replace attachments that fail (e.g. due to battery exhaustion)?** | | | **Yes** | | **No** |
| **If YES, please describe how such provisions will be accomplished.** | | | | | |

RELEASE OF CAPTURED WILD ANIMALS

|  |  |  |
| --- | --- | --- |
| 1. **Will captured wild animals be returned to the wild?** | **Yes** | **No** |
| **If NO, skip to the next section.**  **If YES, will they be released at or near the capture site?** | **Yes** | **No** |
| 1. **For animal release at or near the capture site, indicate what measures will be taken to maximize the likelihood of survival of the released animals and to assure that they will not have a deleterious effect on the wild population (e.g. by introduction of pathogens from captive animals or by disrupting territorial or dominance structures of the wild population).**      1. **For animals released at other locations, give details and indicate anticipated effects that the release may have on both the transplanted animals and the recipient populations and communities.** | | |
| 1. **Specify the locations at which these studies will occur.** | | |
| 1. **List all permits that have been applied for and/or received.**     **NOTE: It is the responsibility of investigator to obtain all necessary permits for work with wild animals. Copies of these permits must be forwarded to BUACC at** [**buacc@brandonu.ca**](mailto:buacc@brandonu.ca) **for attachment to this protocol when they are obtained. No study may commence without the appropriate permits.** | | |
| 1. **What are the likely effects of withdrawal of the numbers of animals proposed on the donor population and the ecosystem of which it is a part?** | | |
| 1. **If applicable, indicate where carcasses will be disposed of.** | | |