

SUNY DOWNSTATE MEDICAL CENTER (DMC)  
 Division of Comparative Medicine (DCM)  
 RODENT IMPORT from NONCOMMERCIAL VENDOR

*Please include the most recent 12 months of health information from the room of origin.*

SUNY DMC Principal Investigator Name \_\_\_\_\_

Additional contact person for above PI and email: \_\_\_\_\_

IACUC approved Protocol Number that lists this genotype\*\*, clinical abnormalities, breeding plan and total number of animals to be produced using the imported animals:  
 \_\_\_\_\_

PI verification signature: \_\_\_\_\_

\*\*if this mouse genotype is not specifically listed on an IACUC approved protocol, you must submit a [new mouse genotype protocol amendment](#) before DCM can process the import request\*\*

Species	Strain or genotype listed on an IACUC approved protocol	Number of males	Number of females	Date of birth

Note that all mice are placed on feed supplemented with **Ivermectin** when received into quarantine; unless, a reason is given to indicate that this would be deleterious to the strain indicated above:

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Name of Institution sending animals \_\_\_\_\_

Contact name \_\_\_\_\_

Contact phone number \_\_\_\_\_

Contact e-mail \_\_\_\_\_

<b>Specify Rodent Diseases Known to be Present</b>	In the room where animals (above) are housed	Currently: _____
		Within last three years: _____
	In the facility where animals (above) are housed	Currently: _____

Please direct all correspondence to: [animal\\_orders@downstate.edu](mailto:animal_orders@downstate.edu)