

**ANIMAL RESEARCH AND SERVICE CENTRE
UNIVERSITI SAINS MALAYSIA**

ANIMAL SURGERY ROOM REQUEST FORM

Researcher/Coordinator:		School/Department:	
USM IACUC Ref. No:	Telephone No.:	Email:	
Animal Species:	Source of Animal:	Total No. of Animal:	
Will any pathogens or chemicals be used in this research? Yes / No If yes, please specify the pathogens / chemicals:			
Procedures:			
Date of Application:	Duration	Start Date:	
		End Date:	
Names of researchers / students permitted to enter the surgery room: 1. 2. 3. 4. 5.			
Special procedure requirements:			
Do you require assistance from ARASC? Yes / No If yes, please specify the assistance required:			
I have reviewed, understood, and agree to comply with all rules and procedures stipulated by ARASC (refer to Page 2).			
Signature & Stamp:		Date:	
FOR ARASC USE ONLY			
VETERINARY OFFICER		DIRECTOR	
Reviewed by:		Approved / Disapproved	
Signature & Stamp		Signature & Stamp	
Date:		Date:	

ARASC SURGERY ROOM RULES AND PROCEDURES

1. The application form must be submitted fourteen (14) days prior to the intended surgery room usage date.
2. Only one (1) application form is to be used throughout the entire research period.
3. IACUC approval must be obtained before any surgical procedures.
4. Only authorized personnel will be allowed to enter the surgery room/area.
5. All personnel should wear clean attire in semi-restricted area.
6. All personnel should wear proper Personal Protective Equipment (PPE) in restricted area.
7. All personnel should practice aseptic technique in the surgery room.
8. All personnel entering the surgery room should have all jewelry removed. Earrings must be covered by the scrub cap.
9. No outside attire / belongings should enter surgical room unless allowed by the person in charge.