



Laboratory Animal Medicine Service (LAMS)

Transfer Form

(please check all that apply)

Protocol Transfer

Account Transfer

TO BE COMPLETED BY CURRENT INVESTIGATOR

Investigator:	Requestor:	Requestor Phone Number:
Emergency Number:	Department:	
Current IACUC Protocol#	Current Account #:	
USDA Category:	Did these animals undergo any procedures or treatments? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes what procedures did you perform?	
Transfer reason:		

NEW Information:

Investigator:	Recipient:	Recipient Phone Number:
Emergency Number:	Department:	
NEW IACUC Protocol #	NEW Account #:	
USDA Category:	What procedures will be performed on this protocol?	

Species	Strain	Sex	Quantity	Est. Length of Stay
		Male Female Either		

Special requirements for animal care (caging, diet):	Number of cages:
Current Building / Room:	New Building / Room:
Authorized Signature:	Date effective:

Do not use animals on new protocol until you receive confirmation of transfer from LAMS.

You must mark each cage to be transferred with a transfer card.

These cards are located in the card holder outside Building 20 Cage Wash rooms.

Submit completed forms as email attachments to: LAMSprocurement@tufts.edu

Incomplete, faxed or hard copy forms will be returned and delay your request.

Questions? Contact Sherry Castonguay at sherry.castonguay@tufts.edu or call 508-887-4981 (x 84981)