OAKLAND UNIVERSITY™

Institutional Animal Care and Use Committee

Policy for the Use of Avian Embryos

The PHS Policy is applicable to activities that involve live vertebrate animals. While embryonic stages of avian species develop vertebrae prior to hatching, OLAW has interpreted 'live vertebrate animal' to apply to avians (e.g. chick embryos) only after hatching. Thus, avian embryos are not covered by federal regulations. Although pre-18-day chicken embryos cannot survive ex ovo, regulatory agency concern stems from the possibility that, if not closely monitored, the eggs could progress to hatching prior to their use. This would result in live animals, which are regulated under both PHS policy and our AAALAC International accreditation. If an egg hatches intentionally or unintentionally they are subject to oversight by the IACUC. IACUC has adopted the following guidelines for avian embryos. The guidelines specifically address chicken embryos and can be adjusted for other avian species according to hatching time.

• Investigators using avian embryos should inform the IACUC using the sample form (below) or in a written document that contains the same information.
• If embryos will be used for research purposes before hatching, the research will not be subject to IACUC review.
• Unused chicken embryos can be euthanized by hypothermia (typically by placing the eggs in a -20º C freezer).
• The IACUC recognizes that inadvertent hatching may occur. In such rare cases, AVMA approved euthanasia methods must be used. Investigators are asked to describe their method for humane euthanasia of inadvertent hatchlings.

Notification of Use of Avian Embryos

Contact Information:

Principal Investigator: _____

Department: _____

E-mail: _____

Phone: _____

Summary of Proposed Use:

Avian Species: _____

Age(s) of Embryos: _____

Method of Disposing of Unused Embryos: (e.g. Freezing in the shell overnight at – 20°C):

Method of Euthanasia in Cases of Inadvertent Hatching: _____

Location of Embryo Use: _____

Principal Investigator Signature _____ **Date** ___/___/___

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