

## Table of substances to be administered in a CMC-HMC IACUC Protocol

Protocol title:

PI Name:

Date Submitted:

Fill out the following table as applicable adding rows as needed, and answer the subsequent question.

| Substance | Species | Route | Dose | Frequency | Concentration and/or volume | Source | Pharmaceutical grade? |
|-----------|---------|-------|------|-----------|-----------------------------|--------|-----------------------|
|           |         |       |      |           |                             |        |                       |
|           |         |       |      |           |                             |        |                       |
|           |         |       |      |           |                             |        |                       |
|           |         |       |      |           |                             |        |                       |
|           |         |       |      |           |                             |        |                       |

For substances in the table above that are available in pharmaceutical grade but you are proposing to use non-pharmaceutical grade, explain and justify below. E.g., consistency with previous experiments; unacceptable fillers, form or concentrations available in pharmaceutical grade products, etc.