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|  Zoos Victoria Animal Ethics Committee Incident Report FormA close up of a logo  Description automatically generated |
| Office Use Only |
| **ZV Project Reference No.**  | **ZV....…………** | **Date of AEC notification:** |  **/ /** | **Date Report Received:** |  **/ /** |
| **NOTES ON COMPLETION OF THIS INCIDENT REPORT FORM**1. It is a requirement of Animal Ethics Approval that all incidents be reported to the Zoos Victoria Senior Research Manager (**Michael Magrath 0419 389 435**) immediately.
2. A completed form must be submitted to research@zoo.org.au at the earliest possible time.
3. Please note that the project and/or procedure/s may need to be suspended until such time that the AEC have had the opportunity to review the incident report and recommendations on mitigating the likely recurrence of the incident.
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| SECTION 1: PROJECT SPECIFICS |
| 1.1 Project details  |
| ZV Project Reference No. |   |
| Project Title |  |
| Commencement Date |  |
| Current Completion Date |  |
| Principal Investigator |  |
| Telephone |  |
| Email |  |
|  |  |  |
| SECTION 2: DETAILS OF INCIDENT/S  |
| **2.1 Number of animals affected by incident** |
| **2.2.1** **Specify the species and number of animals that were affected by the incident.** Please use a separate line for animals sourced externally and those at each property.*Melbourne Zoo (MZ), Healesville Sanctuary (HS), Werribee Open Range Zoo (WORZ), Kyabram Fauna Park (KFP).* |
| **Species (common & scientific name)** | **Sex** | **Number of individuals** | **Location of animals** |
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| **2.3 Incident details** |
| 2.3.1 Describe the context and details of the incident. |
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| **2.3.2 How did this incident affect the animal(s)?**  |
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| 2.3.3 Timeline of events. When was the incident first noticed and reported? Document steps taken from that time to manage the incident by listing dates, times, actions taken and by whom. |
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| 2.3.4 Do you know what caused the incident? If yes, give detail. If no, what is/are the likely cause(s)? |
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| 2.3.5 What actions have been taken to ensure this incident does not get repeated? |
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| **SECTION 3: APPLICANT DECLARATIONS** |
| **3.1 Principal Investigator** |
| I hereby declare that:1. Due care has been taken to ensure that the information I have provided is true and correct.

Name:Signature: Date:  |
| **3.3 Zoos Victoria Listed Contact** |
| I hereby declare that:1. I am aware of the details of the incident.
2. I have discussed the incident with all ZV staff members involved in the project as well as the relevant property General Manager(s) of Life Sciences.

Name:Signature: Date:  |

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| **SECTION 4: AEC ENDORSEMENT (OFFICE USE ONLY)** |
| * 1. **Endorsement of Chair Zoos Victoria Animal Ethics Committee**
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| The ZV Animal Ethics Committee is satisfied with the level of information about the incident provided in this report.Name: **Prof Andrew Fisher**Signature: Date:   |
| All correspondence for research at Zoos Victoria should be directed to research@zoo.org.au |