**Office of Research Compliance**

**Research Sample Transport Form** (3822)

Complete this form for A&M-SA research sample transportation on public roads between campuses or from other destinations. A completed copy of this inventory and other necessary transportation documents must accompany the shipment. This document and other documents must be scanned and returned to Dr. Rani Muthukrishnan, Director of Research Compliance, [rani.muthukrishnan@tamusa.edu](mailto:rani.muthukrishnan@tamusa.edu) via email.

**Please type. Don’t alter the form. Fill N/A if not applicable**

**Personnel Information**

Driver/Carrier name: PI Cell phone #:

Investigator name: A&M-SA Ref #:

Origin of the samples (Country):

CDC/APHIS ePermit# (if applicable):

**Specimen Information:**

Species of animal to be transported (list all):

Strains of biological samples (list all)

Type of research sample (list all)

**Number of animals/vials/items in shipment:**

**Hazard Information: LIST ANY HAZARD AND CARRY APPROVED HAZARD TRANSPORT SOP**

Biological materials, animals inoculated, infected or treated with project-specific hazardous infectious agent, chemical or radiation hazards require an agent/hazard-specific transportation SOP approved by the A&M-SA IACUC, and/or A&M-SA IBC. SOP must be approved prior to transport and must comply with local, federal and state regulations for the transportation of hazardous materials.

**Mark X for all that apply**

\_\_\_ The animals\*/ samples have **NO** known infectious agent, chemical or radiation hazard

\_\_\_ The animals/ samples have been treated with a chemical or pharmacological hazard

\_\_\_ The animals/ samples have been infected with a hazardous microorganism (bacteria, virus, or parasite)

\_\_\_ The animals/ samples have been treated with a radioactive substance

Other, please explain

\*Please see IACUC SOP # 105.00 Statement on Transportation

|  |  |
| --- | --- |
| Hazard(s) **transporting from:** |  |
| Campus/Institution: |  |
| Building: |  |
| Principal Investigator/Laboratory Contact: |  |
| Phone number: | Date of shipment: |
| **Transporting to:** |  |
| Campus/Institution: |  |
| Building: |  |
| Principal Investigator/Laboratory Contact: |  |
| Phone Number: | |
| **INSTITUTIONAL CONTACT:** Dr. Rani Muthukrishnan**,** Office of Research Compliance: 1 (210) 784-1223 | |