

VCU Controlled Substances Inspection Information

Describe how the Controlled Substances will be secured/stored.

Controlled substances will be stored in a metal locked box. The locked box will be secured inside a lock steel cabinet drawer of a laboratory workbench that is anchored to the wall.

Names and Titles of Individuals who will have access to the controlled substances:

John J. Jones (Principal Investigator)

Paula P. Peterson (Postdoctoral fellow)

Who will have the key/combo/access to the storage container: John J. Jones

Who will be responsible for maintaining records and security: John J. Jones and Paula P. Peterson

Who will place orders for controlled substances: John J. Jones

Who will accept delivery of controlled substances: John J. Jones

Research Laboratory Hours: 8am to 5pm

Will the investigator manufacture or import any controlled substance listed above? Yes No

If Yes, include a statement of the quantity to be manufactured or imported and the sources of the chemicals to be used or the substance to be imported:

Supplier(s): If a supplier has not yet been selected check here

Name:

Address:

DEA#:

Contact Name:

Phone Number:

Check here if more than one and provide information on separate sheet

Describe your background and experience with controlled substances:

John J. Jones has over 15 years of experience with animal sedation and surgery

Paula P. Peterson has over 4 year of experience with animal sedation and surgery

Check all that apply. Enter all HM/AD protocols that are applicable (use commas to separate)

IRB Approval - Protocol #

IACUC Approval - Protocol # AMXXXXX

Notice of Claimed Investigational Exemption Number:

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DEA Registrant/Applicant Name: John J. Jones	DEA Registrant No. (if applicable):
Address for Drug Storage: Street, City, Zip: 1101 E. Marshall Street VCU Department of XXXXXXXXXX Richmond, VA 23298-0XXX	Building Name and Room Number for Drug Storage: Sanger Hall Room 5-0XX
Mailing Address of Registrant: Department of XXXXXXXXXX PO Box 980XXX Richmond, VA 23298-0XXX	Protocol PI: John J. Jones
Drug DEA Number(s) to be Used (see <u>Schedule</u>): 7285 Ketamine, 2271 Euthasol	Controlled Substance Schedules to be Used (I, II, III, IV or V): III

Title of Project: Role of MMPs in recovery from nerve injury
Period of Performance: Start: Sept 2016 End:
Summary of Your Protocol and Statement of Purpose: <p>Mice are injected (IP) with ketamine (100mg/kg) and Xylazine (10mg/kg) to produce a deep level of surgical anesthesia. For a 20 gm mouse only 2.0 mg of Ketamine is required so the bulk solution of Ketamine (100mg/ml) is diluted 1:10 (10mg/ml) and 2ml is injected. A brief surgical procedure is then performed on the mice using sterile surgery to achieve the nerve injury model to be studied. After surgery the mice are monitored until they have fully recovered from the anesthesia. After recovery mice are returned to their home cage.</p> <p>After completion of the study mice will be euthanized with 0.1 to 0.2ml of Euthasol. A 20gm mouse requires only 3mg of Euthasol (150mg/kg of pentobarbital, the active ingredient) for reliable euthanasia. The Euthasol mixture (390mg/ml of sodium pentobarbital and 50mg/ml of sodium phenytoin) is viscous and dilution is not recommended. Therefore a more than sufficient dose (0.1-0.2ml or 39-78mg) is administered to the mice.</p>
Amount and Type of Controlled Substances Expected to be Ordered/Used Each Year and Their Purpose: <p>1 bottle of Ketamine (10ml of 100mg/ml = 1,000mg) will be purchased for animal sedation/anesthesia (mouse dose for Ketamine is 100mg/kg).</p> <p>1 bottle of Euthasol mixture (100ml) will be purchased for Euthanasia.</p>

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<input type="checkbox"/>	Funded grant number: FP#
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Check after attaching the following:

- Current Curriculum Vitae (Biosketch)
- Copy of Drug Logs You Will Use (if utilizing VCU suggested logs, check here and OVPRI will add)
- Completed Personnel Screening Forms
- Copy of State Board of Pharmacy Registration
- Picture of the storage container/safe/space

All listed IRB/IACUC approvals include the substances listed and have been approved by the appropriate committee. I certify that the foregoing information is true and correct:

Registrant/Applicant Signature:	Date:
Protocol PI (if different from Registrant):	Date:

Submit completed form, with attachments to controlsub@vcu.edu. The Office of Research and Innovation will review the document, attach a detailed floor plan and our reverse distributor guidelines to your application and submit to the DEA. Applications submitted directly to the DEA will be returned without processing.

OVPRI Approval:	Date:
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Revised 9-2-16