## UT Health San Antonio Master of Science in Clinical Investigation & Translational Science (MSCI-TS) Program

### TSCI 6100 - Practicum in IACUC Procedures

#### **Student Activities in the IACUC Practicum**

The backgrounds and research interests of all graduate students are unique. As a result, the types of activities that will benefit the translational science training of each will be similarly unique. The information below is designed to facilitate the organization, planning, and record keeping of the IACUC practicum (TSCI 6100). Note that for all activities associated with this course, approval must be provided by a Course Director *prior* to undertaking the activity.

Listed below are possible activities which may be undertaken as a part of the IACUC Practicum. Please use this as a starting point in defining <u>your</u> specific activities during the IACUC Practicum. Details of your activities must reflect the number of semester hours of credit associated with your IACUC practicum (1 hour/week for a semester = 1 semester credit hour).

Possible activities that could be considered for inclusion in an IRB Practicum:

- Institutional Animal Care and Use Committee (IACUC) rotation http://research.uthscsa.edu/iacuc/deadlines.shtml
- Completion of the IACUC Member Learners Group in the CITI course (IACUC Chairs, Members and Coordinators, Basic Course)
   http://research.uthscsa.edu/iacuc/IACUC%20Doc/CITI%20Training.PDF

During a given semester, all students must submit a monthly record of their activities associated with this course.

This document must be signed by the student and submitted to Course Director.

Satisfactory completion of this course (and the associated semester credit hours) will be dependent upon submission of these monthly records.

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### **Planned Student Activities**

tudent Name:		Date:	
In anticipation of yo your planned activiti activities that are ye	our participation in this course, please pless. For each activity, provide as much to be arranged in detail, provide a brociated with this course, approval must the activity.	detail as possible. For tho ief description of the plan.	se Note that
Activity 1		Hours/week Hours/semester	
Activity 2		Hours/week Hours/semester	
Activity 3		Hours/week Hours/semester	
Activity 4		Hours/week Hours/semester	
Activity 5		Hours/week Hours/semester	
Activity 6		Hours/week Hours/semester	
Activity 7		Hours/week Hours/semester	
Student Signature			
IACUC Signature	Student Name:  TSCI 6100 Course Director	Date	Date Date

**Electronic/Wet Signatures Are Accepted**