Animal Facility, NISER

Progress Report

Date	
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Name/ Title of the protocol	
Protocol no. assigned	
No. of animals approved	
No. of animals used	
Whether approval for current	
year required- (Yes/No)	
No. of animals required for	
current year	
Brief description of work done/	
D 1/ 1/ 1/0	
Results obtained from approved	
protocols and justification for more animals.	
more animais.	
Mention deviation from	
approved protocol if any	
approved protocorn any	
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Signature of PI Name and Designation