By signing this form and taking Do Not Disturb (DND) cards for room _____, I agree to the following:

- I have received a copy of and have read the USING Do Not Disturb CARDS SOP.
- Contact information will be clearly labeled on each DND cage flag.
- The persons listed will respond to inquiries about the cages in the timeframes noted in the DND SOP.
- OLAR staff is allowed to go into these cages if there is a flood, a medical emergency, if all animals in the cage are dead, or if cages are found past their listed change date.
- Cages flagged with the DND card will be monitored daily by the lab staff.
- Health problems with the animals in the flagged cages will be reported to the veterinary staff.
- Lab staff will change these cages regularly according to OLAR’s husbandry guidelines appropriate for the species and type of cage.
- Bedding from dirty cages will be saved to expose to the sentinel animal on the same rack according to the DND SOP.

Failure to comply with the agreed upon terms above may result in the loss of my right to utilize the DND SOP cage flagging process.

Investigator name_________________________________________________
Lab representative_________________________________________________
Signature__________________________________________Date__________

Contact information:
Name | Phone # (cell and/or extension) | Signature
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