

Resource Summary Report

Generated by PRECISE-TBI on Jul 31, 2026

Indiana University School of Medicine Laboratory Animal Resource Center Core Facility

RRID:SCR_025590

Type: Tool

Proper Citation

Indiana University School of Medicine Laboratory Animal Resource Center Core Facility
(RRID:SCR_025590)

Resource Information

URL: <https://mednet.iu.edu/LARC/SitePages/Home.aspx>

Proper Citation: Indiana University School of Medicine Laboratory Animal Resource Center Core Facility (RRID:SCR_025590)

Description: Core provides basic husbandry, training, supplies, and specialized service support for medical research at IU School of Medicine.

Abbreviations: LARC

Synonyms: Indiana University School of Medicine Laboratory Animal Resource Center (LARC)

Resource Type: core facility, service resource, access service resource

Keywords: ABRF, husbandry, training, supplies, animal service support,

Availability: Restricted

Resource Name: Indiana University School of Medicine Laboratory Animal Resource Center Core Facility

Resource ID: SCR_025590

Alternate IDs: ABRF_2893

Alternate URLs: <https://indianactsi.org/servicecores/core/98/>,
<https://coremarketplace.org/?FacilityID=2893&citation=1>

Record Creation Time: 20240806T053245+0000

Record Last Update: 20260731T043212+0000

Ratings and Alerts

No rating or validation information has been found for Indiana University School of Medicine Laboratory Animal Resource Center Core Facility.

No alerts have been found for Indiana University School of Medicine Laboratory Animal Resource Center Core Facility.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 43 mentions in open access literature.

Listed below are recent publications. The full list is available at [PRECISE-TBI](#) .

Chuang JP, et al. (2025) Smoking and Elevated Preneoadjuvant Chemoradiotherapy Serum Carcinoembryonic Antigen Levels Are Associated With High Tumor Regression Grade and Poor Survival in Patients With Locally Advanced Rectal Cancer. The Kaohsiung journal of medical sciences, 41(6), e70008.

Liu H, et al. (2025) Titin gene mutations enhance radiotherapy efficacy via modulation of tumour immune microenvironment in rectum adenocarcinoma. Clinical and translational medicine, 15(1), e70123.

Zhao W, et al. (2025) Comparison of immunotherapy based total neoadjuvant therapy or standard neoadjuvant chemoradiation for locally advanced rectal cancer: a multi-institutional retrospective study. Frontiers in immunology, 16, 1513716.

Lee HI, et al. (2025) Relationships between the Microbiome and Response to Neoadjuvant Chemoradiotherapy in Locally Advanced Rectal Cancer. Cancer research and treatment, 57(3), 840.

Zhang YZ, et al. (2025) Comparison of prognosis for T4b rectal cancer with different pelvic compartment involvement treated using neoadjuvant chemoradiotherapy and implications for refinement of the current T staging system: A retrospective cohort study. Translational oncology, 53, 102313.

Kelley BS, et al. (2025) Rectal Cancer Disparities Among the American Indian/Alaskan Native Populations. Cancer medicine, 14(8), e70892.

Moulton JE, et al. (2025) A nurse-led model of care to improve access to contraception and abortion in rural general practice: Co-design with consumers and providers. Journal of advanced nursing, 81(2), 1019.

Jiang Y, et al. (2025) Correlation analysis of tertiary lymphoid structure parameters with the prognosis of patients with locally advanced rectal cancer after neoadjuvant chemotherapy: a retrospective study. World journal of surgical oncology, 23(1), 131.

Bae SU, et al. (2025) Neoadjuvant chemoradiotherapy up-regulates PD-L1 in radioresistant colorectal cancer. *Clinical and translational radiation oncology*, 51, 100906.

Ghalehtaki R, et al. (2025) The role of radiotherapy in the management of metastatic rectal cancer: A narrative review on the opportunities for non-operative management and organ preservation. *Clinical and translational radiation oncology*, 53, 100976.

Emoto S, et al. (2025) Preoperative chemoradiotherapy with the TEGAFIRI regimen achieves significant local control in locally advanced rectal cancer. *International journal of colorectal disease*, 40(1), 76.

Liao Z, et al. (2025) MRI-based radiomics for predicting pathological complete response after neoadjuvant chemoradiotherapy in locally advanced rectal cancer: a systematic review and meta-analysis. *Frontiers in oncology*, 15, 1550838.

Zhou W, et al. (2025) Targeting USP1 Potentiates Radiation-Induced Type I IFN-Dependent Antitumor Immunity by Enhancing Oligo-Ubiquitinated SAR1A-Mediated STING Trafficking and Activation. *Advanced science (Weinheim, Baden-Wurttemberg, Germany)*, 12(15), e2412687.

Zhu X, et al. (2025) Daxx Variation as a Potential Predictive Marker of the Therapeutic Response to Neoadjuvant Chemoradiotherapy in Locally Advanced Rectal Cancer. *Cancer medicine*, 14(6), e70815.

Buscaglia A, et al. (2025) Barriers and facilitators to contraception provision among rural healthcare providers. *Contraception and reproductive medicine*, 10(1), 17.

Kupoluyi JA, et al. (2025) Long-acting reversible methods of contraception: trends, levels, and predictors among married women of reproductive age in Nigeria. *Contraception and reproductive medicine*, 10(1), 49.

Aras F, et al. (2025) Evaluation of pre-treatment F-18 FDG PET/CT according to Mandard classification in locally advanced rectal cancer patients undergoing neoadjuvant chemoradiotherapy. *BMC cancer*, 25(1), 1262.

Pricope DL, et al. (2025) CD133 and CD166 Stem Cells Markers Expression, Clinicopathological Parameters, and Fragmentation Response Patterns of ypT3 Rectal Cancer Following Neoadjuvant Chemoradiotherapy. *Biomedicines*, 13(6).

Dou X, et al. (2025) Total neoadjuvant therapy integrating long-course radiotherapy with trifluridine/tipiracil for locally advanced rectal cancer: a single-arm, multicenter phase 2 trial. *EClinicalMedicine*, 85, 103312.

Yang M, et al. (2025) Development of clinical inflammatory models to predict the efficacy of neoadjuvant chemoradiotherapy and survival in patients with locally advanced rectal cancer: a retrospective study. *International journal of colorectal disease*, 40(1), 92.