

Rodent Surgical Record (By Cage)
Investigative personnel are responsible for maintaining a record of pre-operative anesthetic and analgesic use. Ensure that all medications and procedures listed on this sheet are as stated in the IACUC approved animal care and use protocol.

Principal Investigator:					Date:								
Surgeon:					IACUC Protocol #:								
Species:					Procedure:								
	Pr	Presurgical Evaluation											
Animal ID #1 =	Body Wt:	Condition:		Sternal Recumbency: Recovery No			tes:						
Animal ID #2 =	Body Wt:	Condition:	Condition:		Sternal Recumbency: Recovery N		otes:						
Animal ID #3 =	Body Wt:	Condition:		Sternal Recumbency: Recovery Note			es:						
Animal ID #4 =	Body Wt:	Condition:	Condition:		ernal Recumbency: Recovery Note			es:					
Animal ID #5 =	Body Wt:	Condition:		Sternal Recui	Sternal Recumbency: Recovery			otes:					
Surgical Drugs Adn	(ch	Drug Type neck applicable b	oox)			Time Administered Enter time under the appropriate header corresponding to the Animal ID # above or under "All" if applicable							
Drug Name	Anesthetic	Analgesic	Other	Dose (mg/kg, %)	Route	#1	#2	#3	#4	#5	All		

Cage ID:

Rodent Post-Operative Record (By Cage)



Investigative personnel are responsible for maintaining a record of post-operative care and analgesic use. Ensure that all medications and procedures listed on this sheet are as stated in the IACUC approved animal care and use protocol.

Principal Investigator:	Date:
Surgeon:	IACUC Protocol #:
Species:	Procedure:

Animal ID #1 =
Animal ID #2 =
Animal ID #3 =
Animal ID #4 =
Animal ID #5 =
All = Applies to all animals listed above.

Codes below are used for qualitative & consistent assessment purposes.

Letter Code (used in "Surgical Site" column)

Number Code (used in "Condition" column)

A = Incision is clean, dry, intact 1 = Animal is bright, alert, responsive &active

B = Incision is slightly red, clean, dry, intact 2 = Animal is quiet, alert, responsive, less active

C = Incision is abnormal, please describe * 3 = Animal is lethargic & less responsive *

*Contact Veterinary Staff if either Code C or 3 is chosen for any animal.

Animal ID#	<u>Date:</u>	<u>AM</u>	<u>PM</u>	Surgical Site	Condition	Painful? Y/N or Pain Score	Analgesics or Drugs Given / Notes List body weight and complete analgesic or drug name, dose, and route.	<u>Initial</u>