**Rodent Surgery/Procedure Record**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cage #/ Animal ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Protocol #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Species: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Animal’s Initial Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Investigator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Surgeon(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Summary of Surgery/ Procedure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Anesthetic Drugs Perioperative Drugs** (analgesia, antibiotics, etc.)

Drug Dose Route Time initials

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Drug Dose Route Time initials

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Time under anesthesia \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surgical Notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Post-Operative Care**

**Person(s) responsible for post-op recovery: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Post-op instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Date/ Time** | **Bright, Alert, Responsive** | **Nest Building** | **Posture** | **Mobility** | **Eating/ Drink** | **Pain/ Distress** | **Grooming Fur** | **Incision Condition** | **Treatment** | **Initials** |
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**Explanation of abnormal trait(s):**

**✓ =Normal**

**AB =Abnormal- noted**

**NA =Not able to assess**

**+ = Present**

**Addition Information**