

# Rodent Surgery/Procedure Record

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

Species: \_\_\_\_\_ Animal's Initial Weight: \_\_\_\_\_ Investigator: \_\_\_\_\_

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

### Anesthetic Drugs

Drug	Dose	Route	Time	initials

### Perioperative Drugs (analgesia, antibiotics, etc.)

Drug	Dose	Route	Time	initials

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

### Post-Operative Care

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

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

Date/ Time	Bright, Alert, Responsive	Nest Building	Posture	Mobility	Eating/ Drink	Pain/ Distress	Grooming Fur	Incision Condition	Treatment	Initials

✓ =Normal  
 AB =Abnormal- noted →  
 NA =Not able to assess  
 + = Present

Explanation of abnormal trait(s):

  
  
  
  

### Addition Information