# Washington State University

 Institutional Animal Care and Use Committee

**SURGICAL RECORD FORM (RODENT, FISH, AMPHIBIAN, BIRD) GROUP 1 INDIVIDUAL**

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| --- | --- | --- |
| **PI:**  | **Surgeon name:**  | **Date of Surgery:**  |

 |
| **Location of surgery room:**  | **Signature of Surgeon:**  |
| **Cage Card/Animal ID:** | **Species** |
| **Sex M/F** | **DOB** |
| **Surgical Procedure:**  | **ASAF #:**  |
| **Surgical start time**  | **End Time Righting Time:** |

**Anesthetic Agent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intubated? Yes \_\_\_\_ No\_\_\_\_ Ventilator? Yes\_\_\_\_ No\_\_\_\_\_**

 **Induction:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Maintenance\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Drug Record** (pre, peri, post)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Drug** | **Amount (mg)** | **Route** | **Time** | **Pre-Op?** |
|  |  |  |  | Y / N |
|  |  |  |  | Y / N |
|  |  |  |  | Y / N |
|  |  |  |  | Y / N |
|  |  |  |  | Y / N |
|  |  |  |  |  |

**Anesthetic Monitoring & Peri-Operative Care:**

 Anesthetic depth assessed with toe pinch and observation of respirations prior to surgery and every 10-15 minutes.

 Heating device used to maintain body temperature

 Ophthalmic ointment applied

**Description of Operative Procedure and Day of Surgery Notes:**

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**Post-Op Care**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Weight (g)** | **Drug** | **Amount (mg)** | **Route** | **Time** | **Assessment (surgery site; activity)** | **Initials** |
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Comments:

**Date released from post-op monitoring** (sutures/clips/staples removed, surgical site healed, animal appears healthy or euthanized): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contacts: Office of the Campus Veterinarian (OCV); Phone: 509-335-6246; or.ocv.alert@wsu.edu; WSU-IACUC; Phone: 509-335-7951; iacuc@wsu.edu

Per WSU Policy # 6 Approved by WSU-IACUC 9.30. 2015