**SAMPLE #1**

**Daily Log Sheet for Food or Fluid Regulation**

**Refer to the WSU IACUC Policy #35 for Food or Fluid Regulation on the IACUC Website**

Protocol #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PI:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone/s:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Regulation: Food  Water  Both  Baseline Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Regulation Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Regulation End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Feeding Times (if scheduled access): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Animal ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*If being offered ad-libitum, indicate “ad-lib” in column

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| --- | --- | --- | --- | --- | --- |
| **Date/Time** | **Water\***  **Amt given** | **Food\***  **Amt given** | **Body**  **Weight**  **Minimum Weekly** | **Health Observations** | **Initials** |
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