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| **Washington State University****Surgical Record (Rodent) Group 1 individual animal)** | Office of the Campus Veterinarians (OCV) [http://campusvet.wsu.edu](http://campusvet.wsu.edu/)Last revision: 10/21/21 |
| **Principal Investigator:**  | **Date:** |
| **Surgeon/Location:** | **ASAF:**  |
| **Surgical Procedure:**  | **Species/DOB:** |
| **Required actions (check for completion):** **Administer ophthalmic ointment in eyes of all anesthetized animals** **Provide heat during surgery and recovery****Check pedal reflex prior to surgical incision to evaluate depth of anesthesia and every 10-15 minutes****Affix completed surgery card to the cage**  |

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| **Anesthetic Drug(s)**  |
| **Drug(s) (*fill in) Concentration (mg/ml) or %*** | **Dose (mg/kg)** | **Route** |
| *Inhalant* |  |  |
| *Injectable* |  |  |
| **Other Medications Drug(s)** |
| *SQ or IV Fluids* |  |  |
| Antibiotics |  |  |

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| **Analgesics Used** **(ALL 3 TYPES MUST BE USED)** |
| **Drugs *(fill in) Concentration (mg/ml)*** | **Dose (mg/kg)** | **Route** |
| *Local: Lidocaine (0.5%)* |  |  |
| *NSAID: Meloxicam or Carprofen* |  |  |
| *Opioid : Bup SR Lab or Bup HCL* |  |  |

Region of Interest\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Coordinates Used:

A/P\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M/L: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D/V:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Drug Record** *(document time given)*

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| **Animal ID** | **Time** | **Weight (g)** | **Anesthetic** **(mls)** | **Analgesics (mls) Local** | **Analgesics (mls) NSAID** | **Analgesics (mls) Opioid** | **Observations/Other (Fluid administration, post procedural assessment, complications, interventions, euthanasia, etc.** |
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**Post-Operative Monitoring**

* Record dates and times of post-op observations and analgesic administrations. All drugs listed below are administered at the same dose as listed above unless indicated different below. Initial all entries.
* Checkboxes below indicate **required** doses of analgesia. Check NSOP (no signs of pain) and Surgical Site if the animal is exhibiting no signs of pain and surgery site is healing. If signs of unexpected pain are present, you must inform the campus veterinarians at 5-6246 or 509-330-1871.

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| **Date and Time**  |  |  |  |  |  |  |  |
| **Initials** |  |  |  |  |  |  |  |
| **Analgesic details** | **** Bupx**** Car/Mel | **** Bupx**** Car/Mel | **** Bupx**** Car/Mel | **** Bupx**** Car/Mel | **** Bupx**** Car/Mel | **** Bupx**** Car/Mel | **** Bupx**** Car/Mel |
| **Animal Appearance** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** | **** NSOP** Surgical Site OK****\*Animal Score\_\_\_\_** |
| **Notes:** |  |  |  |  |  |  |  |

 **\*Animal Score: 1=Active; 2=Inactive; 3=Moribund; 4=Found dead**

 **Date released from post-op monitoring (sutures/clips removed, surgical site healed, animals appear healthy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**