Small Animal Surgical Record

The PI is responsible for compliance with the IACUC Rodent Surgery Guidelines and the approved protocol This form must be maintained in the laboratory for <u>**1 year**</u> following the date of surgery

PI:	Surgeon:	Date of Surgery:		
Contact Phone #:		Contact Email:		
Cage Card/Animal ID:		Protocol #:		
Surgical Procedure:		Surgical Classification:		

List Anesthetic/Analgesic Regimen (as described in your protocol):

Pre-operative/Intra-operative:

Post-operative:

Animal ID	Animal									Time Given	
	Wt	Agent		Concentrati	ion (mg/mL)	Dos	e (mg/kg)	Volur	ne (mL)	Route	

Anesthetic Monitoring & Peri-Operative Care:

□ Anesthetic depth assessed with toe pinch and observation of respirations prior to surgery and every 15 minutes (required)

□ Heating device used to maintain body temperature (suggested)

□ Ophthalmic ointment applied (suggested)

Surgical Comments:

Check if: Survival or Non-survival surgery

For survival procedures, indicate: Time animal(s) recovered and returned to colony _____ Date returned to colony if different from the date of surgery_____

If complications arise, please contact veterinary staff

PI:	Surgeon:	Date of Surgery:		
Contact Phone #:		Contact Email:		
Cage Card/Animal ID:		ACC Protocol #:		
Surgical Procedure:		Surgical Classification:		

Post-Operative Monitoring Form

Post-operative monitoring must be in accordance with approved protocol and surgical classification requirements (see table below)

Analgesic:	Co	oncentration(mg/mL)	Dosag	e(mg/kg):	Volume (m	ıL):	Route:
		Analgesic Administ	ation (One	Column May Be Use	d For All Animals)		1
Date							
Time							
Initials							

Animal Monitoring (One Line May Be Used For All Animals)

Date	Time	Surgical Site OK? (check one box)				Observations/Comments – Note animal ID when referring to specific animals ** If complications arise, please contact veterinary	Initials	
				Yes		No	staff***	
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		
				Yes		No		

*Animal Score: 1 = Active 2 = Inactive 3 = Moribund 4 = Found Dead

DATE RELEASED FROM POST-OP MONITORING (sutures/clips removed, surgical site healed, and animals appear healthy or euthanized)

After release from monitoring, take this form to your lab for future review during facility inspections

Surgical Classification and Recommendations

Surgical Class	ification	Class 1 Mild Pain	Class 2 Moderate Pain	Class 3 Moderate/Severe Pain	Class 4 Severe Pain			
Procedures		Craniotomy with implant Dental extractions Ocular procedures Subcutaneous implant Skin biopsy/wound Tracheal injections Vessel cut down/cannulation	Embryo transfer Simple laparotomy	Laparotomy with major organ manipulation/removal Organ transplant Orthopedics	Hindlimb ischemia Thoracotomy			
Minimum Post-	Week 1	First 2 consecutive days after surgery	First 2 consecutive days after surgery	First 3 consecutive days after surgery	First 3 consecutive days after surgery			
Operative Monitoring	Week 2	2 additional days of monitoring separated by 3-4 days						
Minimum Post- Operative Analgesia		12 hours	36 hours	60 hours	60 hours			