|  |  |
| --- | --- |
| **Date of Surgery**:  | **Procedure Name**:  |
| **PI**:  | **Protocol #**:  | **Species**:  |
| **Surgeon/Assistant (Initials)**:  | **Animal ID**:  | **Building and Room**:  |

|  |
| --- |
| **Pre-Operative Assessment and Activities** |
| **Weight:** | **Temperature:** |
| **Pre-Surgical Assessment:** |
| **Check all that apply:**🞏 Completed surgical scrub? 🞏 Hair/fur removed at location separate from surgery? 🞏 Instruments visible clean +/- properly sterilized?🞏 Ophthalmic ointment applied? 🞏 Drugs/fluids/sutures not expired? 🞏 Thermoregulatory support provided? |

|  |
| --- |
| **Anesthesia and Analgesia** |
| **Anesthesia (drug, dose, route):** | **Analgesia (drug, dose, route - or N/A):** |
| **Anesthesia Start Time**:  | **Anesthesia Stop Time**:  | **First Incision - Time**:  |
| **Euthanasia Method**:  | **Euthanasia Time**:  |

|  |
| --- |
| **Other Compounds Administered** |
| **List Other Compounds Administered (name, dose, route – or N/A):** |

|  |
| --- |
| **Surgical Procedures and Intra-Operative Monitoring** |
| **Description of Surgical Procedures:** |  |
| **Anesthesia Monitoring:**(check all that apply) | [ ] ECG [ ] BPM [ ] SPO2 [ ] Temperature [ ] Resp/min [ ] Other Method (describe):[ ] Frequency of monitoring: [ ]  Every 15 minutes [ ] Continuous [ ] Other (describe): |