BROWN UNIVERSITY – CENTER FOR ANIMAL RESOURCES AND EDUCATION (CARE)

USDA ANESTHESIA AND SURGICAL RECORD

INVESTIGATOR: _____ **IACUC#** _____ **DATE:** _____

Surgeon(s): _____

PROCEDURE: _____

ANIMAL ID: _____ **VET TECH(s):** **ET Tube size:** _____ **mm**

SPECIES: _____ _____ **Intubation Time:** _____

WEIGHT (kg): _____ **Ease of Intubation:** _____

Medication	mg/kg	mg/ml	Total mg	Total mL	Route	Time	Initials

Time	HR	SYSTOLIC / DIASTOLIC BP	BP MEAN	SPO_2	$EtCO_2$	RR	Temp (°F)	ISO % Ins / Exp	Fluids mL/Hr	NOTES
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Species /ID#: _____ **PI:** _____ **DATE:** _____

PROCEDURE DETAILS:

Time	Notes

RECOVERY: o Smooth o Other (describe):
o Rough o Prolonged

OTHER REMARKS: