**Template Post- Procedure Monitoring Form (page 1)**

**Post-operative monitoring until recovery from surgery/procedure (until incision healed, 10-14 days, or animals all euthanized)**

* Written documentation MUST be completed for every anesthesia and or surgery (or 1 day session of surgeries) and kept with the animal/s during the post-operative period. This form is one option for documenting. Documentation may also be in the animal’s individual medical record
* You MUST leave documentation of a surgical procedure in the animal room until sutures/clips are removed, or ~10-14 days
* You MUST identify all cages with animals that have had surgery-such as by tag or card
* There must be an entry at least once a day until the animals are recovered from surgery

**Animal Identification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is post - operative analgesia to be administered? Yes/No**

**If Yes Drug and Dose (mg/body weight):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Frequency on AUP:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Date** | **Time** | **Incision****normal?** | **Behavior****Appearance** **normal?** | **Eating?** | **Drinking?** | **Feces/****Urine normal?** | **Comments –note any abnormality** | **Analgesia given?** | **Initial** |
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**Template Post- Procedure Monitoring Form (page 2)**

**Post-operative monitoring until recovery from surgery (until incision healed, 10-14 days, or animals all euthanized)**

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| **Date** | **Time** | **Incision****normal?** | **Behavior****Appearance** **normal?** | **Eating?** | **Drinking?** | **Feces/****Urine normal?** | **Comments –note any abnormality** | **Analgesia given?** | **Initial** |
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