

Animal ID _____ Body weight _____ g

Surgeon Name _____

Anesthetist Name _____

Date _____ Start Time _____ End Time _____

Procedure Performed _____

Anesthetics: Induction: _____

Maintenance: _____

Analgesics: _____

Any other drugs administered _____

Time											
Withdrawal reflex	Y N										
Resp. Rate											
mm color											

Recovery

Time										
Resp. Rate										
mm color										
Alertness										

Notes: _____

