

<b>Principal Investigator:</b>	<b>IACUC#:</b>	<b>USDA ID (tag#/Tattoo):</b>	<b>USF ID #:</b>
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<b>Date of Pre-procedural Assessment:</b>	<b>Body Weight:</b>	<b>Technician:</b>
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<b>General Pre-procedural Condition:</b>
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<b>Planned Procedure:</b>	<b>Fasting:</b>
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<b>Anesthetic Plan</b>	dosage (mg/kg) X body weight (kg) = dose (mg) / dilution (mg/ml) = volume administered (ml).
<b>1. Anticholinergic</b>	
<b>2. Tranquilizer Sedative Preanesthetic</b>	
<b>3. Inductant</b>	
<b>4. General Anesthetic</b>	
<b>5. Analgesic</b>	
<b>6. Antibiotic</b>	

<b>Date of Procedure:</b>	<b>Director of Procedure:</b>	<b>Assisting Technician:</b>
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<b>Time Preanesthetics Administered:</b>	<b>Time of Induction:</b>	<b>Time of Procedure:</b>
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<b>IV Fluids Administered:</b>	<b>Other Medications:</b>
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	<b>Time</b>	<b>HR</b>	<b>RR</b>	<b>CRT</b>	<b>Pulse Characteristics</b>	<b>Body Temperature</b>	<b>Other</b>
<b>Preprocedure</b>							
<b>Intraprocedure</b>							
<b>Postprocedure</b>							

<b>Procedure:</b>
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<b>Time of Procedure Completion:</b>	<b>Time When Sternal Recumbent:</b>
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<b>Observations, Treatments, Plan:</b>
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