Academy of Surgical Research

Anesthesia Case Log

**Applicant’s Name:**

|  |  |
| --- | --- |
| **Date:** |  |
| **Case Number:** |  |
| **Animal ID:** |  |
| **Species:**  |  |
| **Strain:**  |  |
| **Sex:** |  |
| **Weight:** |  |
| **Age:** |  |
| **Procedure Performed:** |  |
| **Reason for Anesthesia:** |  |
| **Diagnosis:** |  |
| **Pre-anesthetics and Anesthetics Used:** |  |
| **Anesthesia Equipment:** |  |
| **Parameters Monitored:** |  |
| **Monitoring Techniques:** |  |
| **Method of Pain Assessment:** |  |
| **Summary of Care:** |  |
| **Complications:** |  |
| **Duration of Anesthesia:** |  |
| **Outcome (72-hour survival required):** |  |
| **Euthanasia Date & Method:** |  |
| **Primary or Assistant:** |  |
| **Signature of Manager/Supervisor:** |  |