Anesthesia Record

Investigator	Protocol#	ID #	Species	Breed/Strain	Weight	Sex	Age	Date

Procedures:	Premedication: Dose (mg), Time, Route

Anesthetic Agents	00	15	30	45	00	15	30	45	00	15	30	45	00	15	30	45	00	15	30	45	00	15	30	45	00	15	30	45	00	15	30	45

Codes

X-X Duration

O-O Respiration

C-C Heart Rate

T-T Temp

1=Extubated
2=Sternal
3=Standing

260																																	104
250																																	
240																																	103
230																																	
220																																	102
210																																	
200																																	101
190																																	
180																																	100
170																																	
160																																	99
150																																	
140																																	98
130																																	
120																																	97
110																																	
100																																	96
90																																	
80																																	95
70																																	
60																																	94
50																																	
40																																	93
30																																	
20																																	92

Comments:

Anesthetist: _____

Surgeon: _____