



Duke University
Animal Care & Use Program
Policy



MEDICAL RECORDS FOR ANIMALS

PERFORMANCE STANDARD: All animal care or use activities will be properly documented for confirmation of quality care and appropriate use.

BACKGROUND: The Animal Welfare Act (AWA) and the “Guide for the Care and Use of Laboratory Animals” (Guide) specifically address the use and content of medical records. The following is reference material, from the Duke Institutional Animal Care and Use Committee (IACUC) and Division of Laboratory Animal Resources (DLAR), based on The Guide and USDA Policy #3.

ROLES:

1. Any individual performing an observation, procedure, manipulation, surgery, treatment, medication, or any other care assessment must document his or her activities and observations in the designated animal record.
2. All notations must be initialed and dated.
 - A. Rodents, birds, and cold-blooded species: Detailed records may be kept in an investigator’s laboratory notebook. However, to aid DLAR veterinary staff or regulatory agencies, a brief description of the procedure and the date performed should be noted directly on the animal’s cage card (i.e. OVX 11/07/06 would mean an ovari-hysterectomy was performed on the animal on 11/07/06). This practice would help avoid confusion when animals are showing anticipated or protocol approved clinical signs (i.e. an animal that is recovering from anesthesia may look like it has minor paresis or other minimal neurological deficits when in fact is it simply post-procedure anticipated movement).
 - B. Non-rodent species: The records are maintained by DLAR or the Duke Lemur Center, in the proximity to the animal’s housing area (hard copy or electronic). These records are official individual animal records for higher order species. Regulatory agencies will reference those DLAR records for any questions concerning animal care or health status. Records generated by the principal investigator (PI) outside of the ‘official’ medical record should be submitted to DLAR within 48 hours. Copies from principal investigators (PI) are acceptable to be placed in the official animal record.

OUTLINE OF POLICY / SOP / GUIDELINE:

1. Individual records: Activities and observations will be documented when the animal requires diagnostics, observations, quarantine-related actions, or any veterinary intervention upon arrival.
2. Species that fall into this category are:
 - A. Guinea Pigs
 - B. Lagomorphs
 - C. Carnivores
 - D. Companion Animals
 - E. Livestock
 - F. Non-Human Primates
3. Below are examples of medically appropriate items to be included in the medical records:
 - A. Descriptions of any quarantine and vaccination procedures.
 - B. Descriptions of any illness, injury, distress, and/or abnormal behavior and the resolution of any noted problem.
 - C. Dates and details of medically related observations and test results.
 - D. Dates and other details of all treatments including the medication name, dose, route, frequency, and duration of treatment of drugs or other medications.
 - E. Details of surgical or research procedures performed on the animal. Intra-operative/intra-procedural monitoring should be performed at appropriate intervals. These may include:
 - 1) Temperature, pulse, respiration, capillary refill time and overall clinical assessment.
 - 2) Heart rate, oxygen saturation and blood pressure.
 - 3) Procedures done, drug treatments used, anesthetic regimen.
 - F. Dates, details and results of post-operative monitoring should be recorded daily until incisions, sutures, implants, residual anesthetic effects and/or surgical manipulations have healed. Specific items to note include, but are not limited to:
 - 1) Temperature, pulse, respiration, and clinical assessment of the animals.
 - 2) Incision and suture line status.
 - 3) Existing bandage or bandage change.
 - 4) Any treatments, drugs, or medications.
 - 5) Food and water intake.
 - 6) Urination and defecation.
 - G. Other clinical observations whether related to procedure or not.
 - H. Subjective/objective description of lesion that best characterizes and quantifies it.
 - I. Assessment (e.g., differentials, rule-outs, suspected etiology)
 - J. Diagnostic plan (contact DLAR if not described in the approved protocol).
 - K. Treatment plan (contact DLAR if not described in the approved protocol).
 - L. Dates, details, and results of transfer to other studies
 - M. Dates, details of euthanasia procedure.