

CONVERSE UNIVERSITY INSTITUTIONAL ANIMAL CARE AND USE COMMITTEE (IACUC)

Animal Care Check Sheet

Room: _____ Month and Year: _____

Week of	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Animals observed (time) (7 d/week)							
Food checked (7 d/week)							
Water checked (7 d/week)							
Cages changed (✓ on day done)							
Bottles changed (✓ on day done)							
Trash/Waste removed (✓ on day done)							
Room temperature recorded (7 d/week)							
Room humidity recorded (7 d/week)							
Number of animals housed (7 d/week)							
Caregiver's initials (7 d/week)							

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