

Primates

Leader(s): \_\_\_\_\_

Recorder: \_\_\_\_\_

Processing #

N:	Bleach:	Date:	Recapture: this year / prior / no	Tmp:	Precip:	Hu:
Microchip #			Species:	Age:	Sex:	Grp:

**Vitals**

Time											
Temp											
Resp.											
Palp.	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N	Y N
SpO2											

**Anesthesia**

Time	Drug / dose	Pass-out	Wakeup	Time	Drug / dose	Pass-out	Wakeup

<b>Weight:</b>	UL:	i	c	p	m	UR:	i	c	p	m
<b>Bag Weight:</b>	LL:	i	c	p	m	LR:	i	c	p	m
<b>Dentition info:</b>										

**Stopwatch 00:00:00 = Real Time**

In L-Bag	Bleach on	Microchip	Dental on	In R-Cag
Out L-Bag	Bleach off	Blood	Dental off	Release

**Fecal & Urine (id# -Time)**

Fecal	T / P / R	T / P / R	T / P / R	T / P / R
Fecal	T / P / R	T / P / R	T / P / R	T / P / R
Urine	T / P / R	T / P / R	T / P / R	T / P / R

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**SAMPLES**

Sample	ID#	KetMoj	VALUE	Sample	ID #	Sample	ID #
Blood -Sm x2		HCT		H/N-DNA		SP swab x2	
Blood - L		HGB		H-Merc		ST swab x2	
Blood - cap x2		Ket		Buccal x2		SP odor	
		Gluc		Vaginal x2		swab - blank	
Dental				Ecto		odor (blank)	

**MORPHOMETRICS**

	L	R		L	R	Inj. Loc.	Injury Description
<b>Up. Canine</b>			Foot nail				
<b>Low. Canine</b>			Hand nail				
<b>Nipple</b>			Thigh Circ				
<b>Testes/Vulva</b>	L	W	Calf Circ				
<b>Sp Gland</b>	L	W	Arm Circ				
<b>ST Gland</b>	L	W	Forearm Circ.				
<b>Circum.</b>	Chest	Waist	<b>Head L.</b>				
<b>Body L</b>			<b>Tail L.</b>				

**PHOTOGRAPHS:** Circle when complete ↓

Teeth	SP gland	ST gland	Injuries	Vulva	Scrotum	Nipple	Collar	Full body
General Checklist <input checked="" type="checkbox"/>	<input type="checkbox"/> Ecto-P	<input type="checkbox"/> M-Chip	<input type="checkbox"/> Injury	<input type="checkbox"/> Teeth	<input type="checkbox"/> Dental	<input type="checkbox"/> Sheet	<input type="checkbox"/> Photos	