

**RODENT QUARANTINE RECORD
DIVISION OF COMPARATIVE MEDICINE**

Quarantine Location _____ Assigned Veterinarian/Technician _____ / _____
Facility Room Rack

Date of Arrival _____ Number of Animals _____ / _____ / _____ Housed in _____ Boxes. Arrival Condition _____
Total Males Females #

Principal Investigator _____ Protocol # _____ Phone # _____ Email _____

Species/Lines _____ Post Quarantine Housing Location _____

Origin/Institution Name _____

History of Health Status _____

Special Instructions _____

QUARANTINE SCHEDULE	WEEK 1 Date & Initial	WEEK 2 Date & Initial	WEEK 3 Date & Initial	RESULTS # positive/ # tested
IVERMECTIN 1µl/5g B.W. Topically Day 1 & 10				
FENBENDAZOLE Ad Libitum during weeks 1 through 4				
FECAL PELLET PCR Collect and submit fecal pellets during week 1 & 3				
FUR MITE PCR Collect and submit cage/pelt swabs during week 1 & 3				
SEROLOGY Collect and submit dried blood spot samples during week 3				

INTERPRETATION OF RESULTS _____

PLAN (Treatment, Retest, Release) _____

RELEASED BY _____ DATE OF RELEASE _____
Veterinarian Signature

PI NOTIFIED OF RELEASE _____ DATE OF TRANSFER _____
Quarantine Facility Manager Signature

Original Quarantine Record to Assistant Director, copy maintained at quarantining facility, and copy accompanies animals to new housing.