Food and Water Restriction Record

Protocol # _____ PI: _____ Contact: _____

Type of Restriction (circle one): Water Food Both

Description of Approved Restriction Schedule: _____

Restriction Start Date: _____ Restriction End Date: _____

Animal ID: _____ Baseline Weight: _____ g Target Weight: _____ g

*Ad Lib is acceptable to place in water/food given column

*Please indicate the length of time the animal had free access to food/water or the total amount given (e.g. 2 hours or 1.2ml).

Date	Water Given	Food Given	Body Weight (g)	Currently Restricted (Y/N)	Health Observations (e.g., BAR, dehydrated, thin, hunched, lethargic)	Initials