

## Validation : aseptic surgery - rodent

LAST NAME	FIRST NAME	JOB TITLE
RESEARCH CENTER	PRINCIPAL INVESTIGATOR	RESEARCH PROFESSIONAL
EMAIL		PROTOCOL NUMBER
PROJECT NUMBER		UL STATUS (internal – external)
** CHU-transit account number not admissible, please provide a UL project number **		

Selected validation date	Species used (specify)
Required operative steps (check)	
Preoperative care	
Aseptic technique	
Postoperative care	
Suture technique	
Further information	
What type of surgery do you have to perform?          	
Trainer's section	
Formations complétées :    Animaux de laboratoire <input type="checkbox"/> Protection respiratoire <input type="checkbox"/> Introduction à la chirurgie aseptique <input type="checkbox"/>	
Entrée Nagano <input type="checkbox"/> Courriel de suivi <input type="checkbox"/> Facturé <input type="checkbox"/>	
Commentaires :    	