Final Disposition Record

Date: ________________________________  PI: ________________________________
Completed by: ________________________________  Protocol# ________________________________
Animal(s) ID#: ________________________________  Facility/ Location (housing): ________________________________
Species / Sex: ________________________________

Select from one of the following:  Notes and Details:
☐ Animal Transfer,  ☐ Transfer form attached: ________________________________
☐ Adoption,  ☐ Adoption form attached: ________________________________
☐ Tissue Sharing,  ☐ Tissue Sharing form attached: ________________________________

Complete when final disposition is for a deceased animal:
☐ Deceased During Procedure/ Anesthesia  ☐ Procedure/anesthesia record attached: ________________________________
☐ Found Deceased

List: method of euthanasia and associate drugs used include drug, route, dose, time, initials include
☐ Euthanasia
☐ Non-Survival Procedure

Animal submitted to necropsy?  ☐ No  ☐ Yes, submission by/ date ________________________________
☐ Necropsy report attached

Review and verification of final disposition requires two signatures

<table>
<thead>
<tr>
<th>Date</th>
<th>Name (Print)</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Completed by:</td>
<td></td>
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<tr>
<td></td>
<td>Veterinarian:</td>
<td></td>
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Comments: