

September 12, 2003

Dallas M. Hyde, Director
Calif. National Primate Research Center
One Shields Ave.
Davis, CA 95616

Dear Mr. Hyde,

Pursuant to the state open records law, Cal. Gov't Code Secs. 6250 to 6277, I write to request access to and a copy of all lab records for crab-eating macaque monkeys:

#28098 (female) and #28104 (a male).

If your agency does not maintain these public records, please let me know who does and include the proper custodian's name and address.

I would like to inquire as to their current health (are they still alive), how are they currently being used, what does their diet consist of, are they caged alone and are they given opportunity to socialize with other monkeys, and what are the future plans for them?

If they do not yet have names, I would like to name them Gracie and George. Gracie's 6th birthday is coming up on Oct. 1, and I would like to see that she and some of her neighbors get some special treats (bananas or other fresh fruit and/or crab) during that time. I can mail them if you will guarantee me that they will receive them. Goodness knows, they suffer pain and isolation enough the rest of the year; could it be too much to give them in return a few treats once a year? They are so much like us humans, it is really immoral to be experimenting on them in the first place! I can only imagine their mental suffering from isolation and fear of more pain and physical suffering.

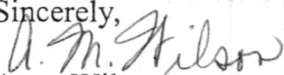
I agree to pay any reasonable copying (\$0.15/page) and postage fees to total not more than \$10 each. If the cost would be greater than this amount, please notify me. Please provide a receipt indicating the charges for each document.


As provided in the open records law, I will expect your response within ten (10) business days.

If you choose to deny this request, please provide a written explanation for the denial including a reference to the specific statutory exemption(s) upon which you rely. Also, please provide all segregable portions of otherwise exempt material.

Please be advised that I am prepared to pursue whatever legal remedy necessary to obtain access to the requested records. I would note that willful violation of the open records law can result in the award of court costs and reasonable attorney fees.

Thank you for your assistance.

Sincerely,

Anne Wilson



✓ CC: Primate Freedom Tag Project

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SANTA BARBARA • SANTA CRUZ

LARRY N. VANDERHOEF
Chancellor at Davis

OFFICE OF THE CHANCELLOR
ONE SHIELDS AVENUE
DAVIS, CALIFORNIA 95616-8558
TELEPHONE: (530) 752-2065
FAX: (530) 752-2400

October 20, 2003

Anne Wilson

RE: California Public Records Act Request

Dear Ms. Wilson,

We have completed the search for all records pertaining to primates #28098 and #28104 as you requested in your letter dated September 12, 2003 and have found the following:

- 1) All of the pages from the health jacket of 28098 and 28104 (105 pages)
- 2) Animal Demographic/Medical Profile for animal 28109 (7 pages)

These records total 112 pages. As noted in a previous letter to you, the California Public Records Act allows for the charging of \$.10/page for all records provided. Prior to our sending you these records you will need to forward a check made payable to the UC Regents in the amount of \$11.20. Once payment has been received, we will send the records to you immediately.

I look forward to hearing from you regarding this request.

Sincerely,

A handwritten signature in cursive script that reads "Lynette Temple".

Lynette Temple
Information Practices Coordinator
(530) 752-3949

October 25, 2003

Lynette Temple
Information Practices Coordinator
Univ. of Calif, Davis
Office of the Chancellor
One Shields Ave.
Davis, CA 95616-8558

Re: California Public Records Act Request

Dear Ms. Temple,

Thank you so much for your letter of Oct. 20. I have been thinking of my request and was just about to write back to you inquiring. Thank you so much for your diligence and attention.

Please find enclosed a check for \$11.20, the amount you requested for the copies I requested.

If it isn't in the records, could you give me an idea of what the monkeys are normally fed? And how much socialization they are given?

I look forward to receiving the information.

Thank you again for your attention to this request.

Sincerely,

A handwritten signature in cursive script that reads "Anne Wilson".

Anne Wilson
14459 Muriel Dr.
Moreno Valley, CA 92553-2901

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DAVIS, CALIFORNIA 95616-8558
TELEPHONE: (530) 752-2065
FAX: (530) 752-2400

October 28, 2003

Anne Wilson

RE: California Public Records Act Request

Dear Ms. Wilson,

Enclosed please find a receipt for your payment of \$10.20 as well as the following records:

- 1) All of the pages from the health jacket of 28098 and 28104 (105 pages)
- 2) Animal Demographic/Medical Profile for animal 28109 (7 pages)

We have redacted personally identifying information concerning individuals directly involved in research activities concerning primates due to verbal and physical harassment, including death threats, which have been made against these individuals. This information is withheld pursuant to section 6255 of the California Public Records Act, which permits the University to not disclose records when the public interest served by not making the records public clearly outweighs the public interest served by disclosure of the record. In this case the public interest in withholding personally identifying information about these individuals due to actual harassment and threats of harassment that have occurred and continue to occur clearly outweighs the public interest in the disclosure of this information. See, e.g., *Times Mirror Co. v. Superior Court*, 53, Cal.3d 1325 (1991) (public interest in withholding the appointment calendars of the Governor of California due to "potential threat to the Governor's physical security" outweighed public interest in disclosure of the calendars); *New York Times Co. v. Superior Court*, 218 Cal.App.3d 1579 (1990) (names of persons who have violated water allocation limits may be withheld when there is evidence that release of such information may subject those persons to harassment or assault).

The California National Primate Research Center (CNPRC) is accredited by the Association for the Assessment and Accreditation of Laboratory Animal Care (AAALAC). All animals are maintained at the CNPRC in housing that meets the standards established by the NIH Guide for Care and Use of Laboratory Animals and the USDA Animal Welfare Act. All animals receive measles and tetanus vaccines during their first year in the colony and have health evaluations three times a year. Animals are fed twice daily and receive monkey chow along with supplements of fresh fruit and vegetables. Animals housed indoors receive toys and mirrors, while animals housed outside have climbing structures, swings and other cage enrichments.

Animals may be on a wide variety of projects at the CNPRC including studies on treatment and vaccination for pediatric AIDS, development of new infant formulas, and gene therapy for the treatment of cystic fibrosis. All projects are directed toward increasing knowledge of basic biology and helping to improve both human and animal health.

Should you have any additional requests, please let me know.

Sincerely,

A handwritten signature in cursive script that reads "Lynette Temple".

Lynette Temple
Information Practices Coordinator
(530) 752-3949

Enclosures

ENTERED APR 26 2001
RKH

CALIFORNIA REGIONAL PRIMATE RESEARCH CENTER

ANIMAL DEATH RECORD

Species: Mcy ID #: 28104 Date of Death: 04/26/01

Type of Death: _____ Date Reported: 1/1

D Spontaneous Death Home Location: 1604-34

X Experimental Design Present Location: _____

A Experimental Accident Weight: 4.87 kg

M Medical Cull Diagnostic Sex: ♂

K Medical Cull

S Surgical Cull

Probable Cause of Death (technician or clinician): i.v. pentobarbital / brain perfusion
Signed DZe

Pathological Diagnosis (clinician or pathologist): ① brain perf. ② tissue harvest ③ NGL

Necropsy not performed Signed _____



ANIMAL ID	CURRENT LOCATION	DATE	WT(KG)	DEMOGRAPHIC ACTIVITY, CLINICAL OBSERVATION, OR MEDICAL EVENT
MCY 28104	DEAD	MAR29-94		ACQUIRED TO QUJ2-4
		APR04-94		SERUM BANK SAMPLE
				MICROBIOLOGY
				RECTAL SWAB
				MICROBIAL CULTURE, COMPLEX: SALMONELLA, SHIGELLA, YERSINIA
				NEGATIVE SHIGELLA, SALMONELLA, YERSINIA CULTURE
				PARASITOLOGY
				FECES, CAGE SAMPLE
				ENTAMOEBIA COLI
				CONCENTRATION
		APR18-94	4.140	
		MAY02-94	4.200	
		MAY16-94	4.180	
		MAY31-94	4.340	
		JUN13-94	4.300	
		JUN27-94	4.250	
		JUL20-94		MOVED FROM QUJ2-4 TO SW1606-5
			4.200	
		SEP27-94	4.050	
		NOV23-94	4.130	
		DEC22-94		SERUM BANK SAMPLE
				CLINICAL TREATMENT
				ADMINISTRATION OF DRUG OR SUBSTANCE, SUBCUTANEOUS
				PENICILLIN G PROCAIN
				5 DAYS
				MICROBIOLOGY
				NASAL MUCUS
				MICROBIAL CULTURE, AEROBIC, SCREEN
				STAPHYLOCOCCUS, COAGULASE POSITIVE
				SUPPLEMENTAL TRTMT
				ADMINISTRATION OF DRUG OR SUBSTANCE, ORAL
				DRUG
				5 DAYS
				ADMINISTRATION OF DRUG OR SUBSTANCE, ORAL
				TSE - TANG SOAKED CHOW (8-10)
				5 DAYS
		JAN25-95	4.080	
		MAR22-95	4.070	
		MAY23-95	3.980	
		JUL25-95	4.250	
		SEP26-95	4.340	
		OCT10-95		SERUM BANK SAMPLE
				CLINICAL TREATMENT
				ADMINISTRATION OF DRUG OR SUBSTANCE, INTRAMUSCULAR
				IRON DEXTRAN
				30 DAYS

ANIMAL ID	CURRENT LOCATION	DATE	WT (KG)	DEMOGRAPHIC ACTIVITY, CLINICAL OBSERVATION, OR MEDICAL EVENT
MCY 28104	DEAD	NOV22-95	4.820	
		JAN23-96	5.060	
		MAR26-96	5.100	
		MAY21-96	5.140	
		JUN27-96	5.260	
		JUL01-96		CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, INTRAMUSCULAR CEFAZOLIN 10 DAYS
		JUL08-96		DISCHARGE DIAGNOSIS AMPUTATION PATIENT STATUS DETERMINATION, GREATLY IMPROVED CLOSURE BY SUTURE FINGER FRACTURE DEHISCENCE OF WOUND WOUND, LACERATED TRAUMATIC AGENT PATIENT STATUS DETERMINATION, GREATLY IMPROVED CLOSURE BY SUTURE HAND DEHISCENCE OF WOUND WOUND, LACERATED TRAUMATIC AGENT NO LINK
		JUL22-96	5.400	
		SEP19-96	5.270	
		NOV18-96	5.650	
		JAN22-97	5.480	
		MAR12-97	5.400	
		MAR18-97	5.330	
		APR11-97		DISCHARGE DIAGNOSIS PATIENT STATUS DETERMINATION, GREATLY IMPROVED FINGER INFLAMMATION BITE TRAUMATIC AGENT NO LINK
		MAY15-97	5.540	
		JUN27-97		SERUM BANK SAMPLE
		JUL23-97	5.440	
		JUL28-97	5.320	SUPPLEMENTAL TRTMT ADMINISTRATION OF DRUG OR SUBSTANCE, ORAL POTASSIUM GLUCONATE ELECTROLYTES, ORAL TANG 8 DAYS

ANIMAL ID	CURRENT LOCATION	DATE	WT (KG)	DEMOGRAPHIC ACTIVITY, CLINICAL OBSERVATION, OR MEDICAL EVENT
MCY 28104	DEAD	SEP03-97 SEP18-97	5.620	MICROBIOLOGY RECTAL SWAB MICROBIAL CULTURE, COMPLEX: SALMONELLA, SHIGELLA, YERSINIA NEGATIVE SHIGELLA, SALMONELLA, YERSINIA CULTURE MICROBIAL CULTURE, COMPLEX: CAMPYLOBACTER NEGATIVE CAMPYLOBACTER CULTURE
		SEP24-97		CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, ORAL METRONIDAZOL 10 DAYS
		NOV03-97	5.920	
		JAN20-98	5.430	
		MAR18-98	5.380	
		APR08-98		CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, ORAL METRONIDAZOL 10 DAYS
		MAY20-98	5.350	
		JUL20-98	5.550	
		SEP17-98	5.760	
		NOV17-98	5.840	
		NOV25-98		CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, ORAL METRONIDAZOL 10 DAYS
		JAN14-99	5.660	
		MAR18-99	5.670	
		MAY03-99		MOVED FROM SW1606-5 TO SW1606-60
		MAY19-99	5.190	
		JUN15-99	5.440	
		JUN16-99	5.436	
		JUL20-99	5.600	
		SEP20-99	5.450	MICROBIOLOGY RECTAL SWAB MICROBIAL CULTURE, COMPLEX: SALMONELLA, SHIGELLA, YERSINIA NEGATIVE SHIGELLA, SALMONELLA, YERSINIA CULTURE MICROBIAL CULTURE, COMPLEX: CAMPYLOBACTER NO SIGNIFICANT MICROBIAL GROWTH
		SEP22-99		SERUM BANK SAMPLE

ANIMAL ID	CURRENT LOCATION	DATE	WT (KG)	DEMOGRAPHIC ACTIVITY, CLINICAL OBSERVATION, OR MEDICAL EVENT
MCY 28104	DEAD	NOV15-99	5.750	CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, SUBCUTANEOUS PENICILLIN G PROCAIN 3 DAYS
		DEC02-99		
		DEC07-99		DISCHARGE DIAGNOSIS AMPUTATION PATIENT STATUS DETERMINATION, GREATLY IMPROVED CLOSURE BY SUTURE FINGER WOUND, LACERATED TRAUMATIC AGENT
		JAN25-00	5.620	
		MAR20-00	5.380	
		MAY15-00	5.440	
		JUL12-00	5.370	
		AUG18-00	5.440	
		SEP18-00	5.440	
		NOV14-00	5.760	
		NOV22-00		IMMUNIZATION: CODE "K"
		JAN16-01	5.530	
		FEB28-01		MOVED FROM SW1606-60 TO SW1604-34
		MAR13-01	5.560	
		MAR26-01		CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, INTRAMUSCULAR BVP 2674 / BAYTRIL / ENEROFLOXACIN 5 DAYS MICROBIOLOGY MICROBIAL CULTURE, COMPLEX: SALMONELLA, SHIGELLA, YERSINIA RECTAL SWAB NEGATIVE SHIGELLA, SALMONELLA, YERSINIA CULTURE MICROBIAL CULTURE, COMPLEX: CAMPYLOBACTER CAMPYLOBACTER COLI
		APR12-01		MOVED FROM SW1604-34 TO HO1333-2 CLINICAL TREATMENT ADMINISTRATION OF DRUG OR SUBSTANCE, INTRAMUSCULAR BUPRENEX/BUP/BUPRENEX INJECTABLE 3 DAYS ADMINISTRATION OF DRUG OR SUBSTANCE, INTRAMUSCULAR CEFAZOLIN 5 DAYS EXP. INTERVENTION INSERTION OR IMPLANTATION OF THERAPEUTIC DEVICE HEAD NO LINK

CALIFORNIA NATIONAL PRIMATE RESEARCH CENTER
9-0
ANIMAL DEMOGRAPHIC/MEDICAL PROFILE, REPORT 315
THU, OCT 9, 2003

ALL RECORDS THRU OCT0

PAGE 5

ANIMAL ID	CURRENT LOCATION	DATE	WT(KG)	DEMOGRAPHIC ACTIVITY, CLINICAL OBSERVATION, OR MEDICAL EVENT
MCY 28104	DEAD	APR16-01 APR26-01	4.870	MOVED FROM HO1333-2 TO SW1604-34 MOVED FROM SW1604-34 TO DEAD

*** END ANIMAL MCY 28104

END OF REPORT

mc4 28104

California Primate Research Center

1

Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P)*	HYDRATION (G.F.P)*	STOOL (N,SS,LB)†	Animal Number	Page	
									OLD ID #		
									Observation	Init	
3-29-94										Received into Quarantine T2-4	103
4-4-94	3.92	M	0	0	0	G	N			Checked CBC, Serum: Fib #1, Siron	
										Renal Complex Test	
4/10/94										9/10: D.3cc ket for ULL	
										Screen-in (see form).	
										APP: Subfactory screen-in	K
4-18-94	4.14	M	0	0	0	G	N			Checked Blood 8ml	104
5-16-94	4.35	M	0	0	0	L	L				
6/10/94	4.18	M	0	0	0	L	L			Screening done	
										1st Interjection	
6-3-94	4.34	M	0	0	0	G	N			Screened	
6-13-94	4.30	M	0	0	0	G	N			Screened	
6-27-94	4.25					G	N			Screened	
7-20-94										Transition into ket	
7-20-94	4.2									BUS screen, renal test,	
										chronic kidney disease (CKD)	
7-20-94										moved to 1/AL	
7/20/94										O. Gram panel (7/21), X.	
										alternations of ALT (874U)	
										otherwise unremarkable	
8-16-94										Bled 15 ml	
8/11/94	late entry										
8-26-94										Electrocardiated E	
8/30/94										Checked → 1310 4254 POPON	

730620.01

* G = good, F = fair, P = poor
 ** N = normal, SS = semi-solid, L = liquid, B = Bloody

28104		California Primate Research Center										2	
Animal Number												Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P.)	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init			
8/24/94									Electrostimulation (+)	DL			
8/31/94									Electrostimulation (+)	RW			
9/2/94									Electrostimulation (+)	DL			
9/5/94									Chained → 1305 w/6 6954 PCP01	MS			
9/8/94									Electrostimulation (+)	DL			
9/10/94									Electrostimulation (+)	DL			
9/13/94									Electrostimulation (+)	DL			
9/16/94									Electrostimulation (+)	DL			
9/19/94									Electrostimulation (+)	DL			
9/21/94									Electrostimulation (+)	DL			
9-21-94									Chained → 1305 w/6 6954 PCP01	TO			
9-27-94	4.05								Rectal Dental	TO			
10/12/94									Bled ? w/6 6955	PO			
11/23/94	4.13									JV			
12/19/94								G.G.W	SG: G.W.K. Re. bloody nose. Diet not change. blood in or around nares, but not on nose. The animal using its nose set with the back of its hand. Post-herpet				

DATE	WEIGHT kg	PHYSICAL EXAM
12/22	2.8	Temperature <u>103.2</u> °F
	w/o collar	HR _____ RR _____
		Pulses <u>strong</u>
		Gen. Body Condition <u>good</u>
		1. Integument <u>good</u>
		2. Oral Cavity <u>NSF</u>
		3. Eyes <u>NSF</u> 4. Ears <u>NSF</u>
		5. Musculoskeletal <u>NSF</u>
		6. Thorax Auscultation <u>NSF</u>
		7. Abdominal Palpation <u>NSF</u>
		8. Spleen <u>WNL</u> 9. Liver <u>WNL</u>
		10. Lymph Nodes <u>WNL</u>
		11. Urogenital <u>WNL</u>
		12. Rectal Palpation <u>NE</u>

G = good, F = fair, P = poor
 ** N = normal, SS = semi-solid, L = liquid, B = Bloody

Animal Number								Page		
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G,F,P)*	HYDRATION (G,F,P)*	STOOL (N,SS,L,B)*	Observation	Init

12/22/94

PP6 140% 0.5 SC SID
 DRUG DOSE AMT. ROUTE FREQ.

12/22 12/24 5
 START END DAY
 28104 1600 -5
 AN# LOC.

ADD COMMENTS:

SO PE performed because animal has epistaxis and poor appetite. Nares blocked with serous, purulent, clotted discharge. Removed discharge, scrubbed nose for culture and cleaned nares. Blood collected for CBC and serum bank. 140,000 units of PP6 administered SQ.

A: Probable moraxella URTI leading to poor appetite
 P: PP6 x 5 days
 - FRT, TSB x 5 days
 - Clean nares PRN

12/23/94

SO Nares clean today, attitude/appetite greatly improved. Epistaxis noted today.

A: Probable moraxella URTI
 P: Clean nares PRN

Continue PP6 thru 12/24
 Continue supplements

OZ: CBC (12/22) revealed a microcytic (MCV=65) normochromic anemia (Hct=30.0, Hgb=9.4) w slight toxic granulation of the neutrophils and hyperfibrinogenemia (500 mg/dl)

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730620.01

28104		California Primate Research Center							4 / Page	
Animal Number									Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init
12/28/94									S/O: Nasal swab culture (12/22) 4+ Coag + Staph. A: Normal flora / containment S/O ² : PMNs seen in smear. A ² : Responded to tx: P: Monitor for recurrence	kg
1/25/95	4.08	1/1	-	-	-				ML Ret Dental	JP
3/22/95	4.07									JP
5/23/95	3.98	-	-	-					TB Test, Dental	PK
6/4/95						G G ^{1/2}			S/O: BAX; Dept for Liquid stool P: Monitor for persistence	kg
6/14/95						G G N			S/O: BAX Re Blood under cage A: No source identified possible from epistaxis as animal had previous episode and tx P: Monitor	JP
6/30/95						G G ^{1/2}			S/O: BAX; re liquid stool.	me
7/2/95						G G			S/O: BAX; Dept stool - unable to confirm.	JP
7/9/95						G G L			S/O: BAX up loose stool: stool was liquid.	JP
7/25/95	4.25									JP
8/7/95						G G			S/O: BAX - dept for kg P: schedule for kg w/	JP
9/26/95	4.34	1/1	-	-	-				Serum Bank	PL

* G = good, F = fair, P = poor

** N = normal, SS = semi-solid, L = liquid, B = Bloody

730620.01

28104

California Primate Research Center

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G,F,P)*

HYDRATION (G,F,P)*

STOOL (N,SS,L,B)*

Observation

Init

Fe Dextran 0.2 ml Q7D
 DRUG DOSE AMT. ROUTE FREQ.
 10/10 11/9 30
 28104 1606.5
 AN# LOC

ADD COMMENTS:

11/14/95

5log 1ml, v/o # 4469

WNL

11.15.95

S/O: 2 (v)E (11/14): WNL.

WNL
9B

11/22/95 4.82

12-10-95

S/O: performed gingivectomy on maxillary canine and alveolar tissue removed. See dental report

P-F

~~1/23/96~~ 5.06

M/R

1cc ket dental

P-R

1/23/96 5.06

M/R

3/26/96 5.10

5/21/96 5.14

M/R

1cc ket

P-R

M

6/27/96 5.26

E/E N S/O: BAR, rept trauma to finger

Good, but ket - Palm of (L) Hand - Back of (L) hand
(L) Hand D2 with abrasion -

old abrasions / trauma

All granulating in

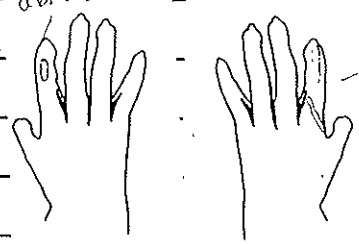
by 2nd intention -

No obvious signs of

infection - no pus/ooze -

A: old wounds - granulating in.

P: monitor.



glash
like
at

7/1/96

S/O: BAR, reptd finger trauma.

(L) D2 cut longitudinally to

P-R

* G = good, F = fair, P = poor
** N = normal, SS = semi-solid, L = liquid, B = Bloody

730620.01

① Entry is wrong space 1/23/96 P-R. ② mistake sum 7/1/96

28104

California Primate Research Center

6

Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPELITE (G.F.P.)

HYDRATION (G.F.P.)

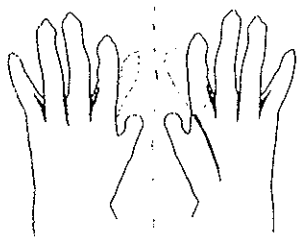
STOOL (N,SS,L,B)

Observation

Init

7/1/96 (contd)

(L) hand: dorsal palmar



bone with laceration continuing to palm ~ 2 1/2". P2 broken completely. Wound is clean-flushed w/ DNS, amputated B2 to P1 metacarpal joint. Sutured skin w/ 3.0 Vicryl in beta interrupted simple & incise stitches (~14 total). Bdg'd w/ adaphc.

Started on cefazolin 10 day.

A: (L) hand laceration & amputation.

P: ✓ bdg 7/2/96, Δ bdg 7/3/96. JGM

DRUG	185.2	0.32	IM	TID
START	7/1/96	7/5	10	
END	7/10/96			
AN.#	28104	LOC.	1000-5	

ADD COMMENTS:

7/2/96

F G N

SO: BAR mildly oedematous, spongy somewhat torn, mostly intact
P: urinary, mucous, serous at that point

113

7/3/96

G G N

SO: BAR. Dosed w/ 0.5 ml ket. Removed bdg. Sutures intact wound line closed except for lacer (~4mm) in center palm. Reapplied adaphc & rebdg'd.

P: ✓ bdg 7/4/96, Δ bdg 7/5/96 JGM

7-596

G G N

SO: Bone kept for hist. to be id today. Dosed w/ 0.6 ml ket. Removed bdg. Sutures intact, line closed. Left

129

* G = good, F = fair, P = poor
** N = normal, SS = semi-solid, L = liquid, B = Bloody

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (M,SS,L,B)*

Observation

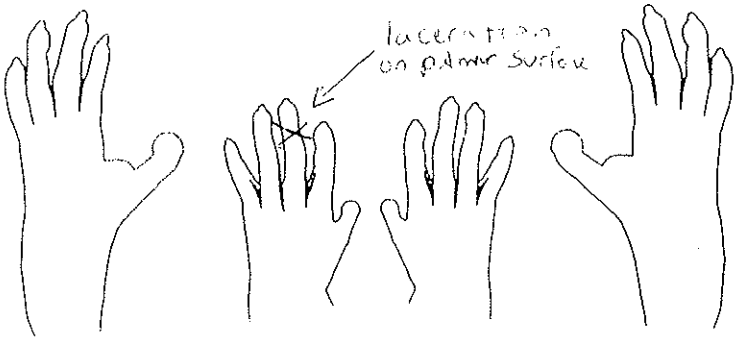
Init

7/5/96	(contd)									bdg.	
										A: Healing trauma to (R) palm.	
										P: Visual & daily of subvies.	JEM
7/10/96										G & N S/O: BAR, all subvies out of (L) palm	
										but low contact. P: Monitor	JEM
8/5/96										G & N S/O: BAR, low contact with (R) palm.	
										P: As usual	JEM
11/8/96										G & N S/O: BAR, (L) palm low contact	
										P: Healing (L) palm trauma	
										amputation	
										P: Assess die from O's sheet.	JEM
9/19/96	5.27									. See Ket Dental	PK/JEM
11/18/96										Diad 3ml/s CR-B01	JEM
1/18/97	5.65										JEM
1/22/97	5.48									in ket dental	PK
1/30/97										G & N S/O: BAR reported for red avulsion	
										D ₂ at base. wound is older &	
										neatly healed. No action necessary	JEM
										at this time	JEM
2/17/97										G & N S/O: BAR, myelocoin infection wound (L)	
										(R) D3 hand. Old wd.	JEM
2/21/97										G & N S/O: BAR, reported for trauma (R)	
										D ₃ . Appears old but tissue is	

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Animal Number									Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init
									fresh & exposure of bone is possible. P: consider amputation after close evaluation under sedation	IB/DF
									S/O ² 0.5ml ketamine given IM fingertip is pink & dry. Nail bed is present & no bone is exposed A: slow healing wound P: cont to monitor but wound requires no tx at this time	IB/DF
3/12/97	5.4									



SO Palmar surface of D3 of (L) hand lacerated at P2 with eversion of SQ fat but no sign of infection. (cleaned w betadine scrub + alcohol)

and covered w telfa - Bandageul entire (L) hand + administered 10mg of banamine IM

P ✓ Bd On 3/13 + A, evaluate on 3/14

BC

3/13/97

0.5 ml ketamine. P2 off. wound exposed. Flushed w DNS of

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G,F,P)*

HYDRATION (G,F,P)

STOOL (N,SS,L,B)†

Observation

Init

cmf

bandage to W.D above elbow.

P: Δ hd thrombosed; evaluate

(P)

0.5 cket in, Bd was off.

Digit traces "blowing" with remarkably no bone exposure

Clear of smell out of discharge.

(A) not ready for closure

(P) Wet → dry, bridged;

Δ is 24 hrs. Δ doing well

granulation bed forms

omy Baroni IM Δ

A
P

3/14/97

3-15-97

SO. BAR gave 0.55 cc

Vitaminia Removed Bd.

from hand. wound is

clean but still not great

granulation bed. cleaned

w/ PBS & rebandaged WET → dry

A: Funge Trauma

P: Δ Bd on 3-16. Assers to

Bd. w/ Telfa.

KH

3/16/97

SO. BAR, gave 60mg Nexamine IM. Reband

Intract bed, firm @ hand PJ beginning

to granulate. Replaced wet → dry bds

w/ Telfa.

A granulating finger wound.

* G = good, F = fair, P = poor

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (N,SS,L,B)

Observation

Init

3/16/97	cont									P. Δ Delg on Monitor 3/17 co assess granulation bed	
3/18/97	5.33									SO: BAR, constructed w Orlon ketamine - D3 (L) hand SQ tissue less proliferative today - excised compromised tissue from wound area and placed Telfa Bid covered by elasticon	cf
3/20/96									G.V. W	P. ✓ Bid on 3/19 + II on 3/20 so: BAR, D3 (L) hand wound appears to be granulating + contracting - placed adaptic over wound + Bandaged finger + hand/wrist	Bc
										P. ✓ Bid on 3/21 + re ✓ wound on 3/22	Bc
3/22/97									G (N) M	SO: BAR, Gave C.S cc ketamine SQ Anesth removed bag SQ tissue which is granulating and should show some amount of crystalline serum exudate. Animal does not have mobility on digit, can not bend it. Replaced Telfa and	

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Animal Number								Page		
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init
									rebandaged with elastration	
									Ameliorated body from elbow	
									P ✓ A 3/23/97 + A 3/24/97	GS
3/21/97						G			SO BAR. Bdg intact	GS
3/25/97									SO: BAR. 0.5 ml ketamine. removed	
									bd. wound healing well & dry.	
									Left bandage off.	
									P: Visual ✓ digit	(P)
3/26/97						G			SO: D3 (L) hand wound granulating	
									well	
									P: Continue daily visual ✓	Be
3/27/97						G			SO: D3 (L) hand granulating very	
									well but animal still favors	
									digit slightly	
									P: Continue daily visual ✓ of	
									D3 of (L) hand	Be
3/28/97						G			SO: BAR, digit healing well	
									P: re ✓ on 3/31 & assess for	
									D/C from O/P sheet	
3/31/97									D3 (L) hand digit wound has	
									healed but animal has sustained	
									a new nail avulsion to the tip	
									of the same finger	
									P: ✓ D3 (L) daily + Tx if	
									necessary	

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① error. Should read "24" GS 3/21/97

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Animal Number									Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P.)	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init
4/1/97									sc. D3 (L) hand tip still raw but no sign of inflammation P Continue daily visual ✓ of D3 (L) hand Clean P/W	BC
4/12/97						G	F		sc. D3 (L) hand wound appears to be granulating P Continue daily ✓ of D3 (L) hand	BC
4/14/97									Distal tip of digit exposed but appears clean, no swelling of some granulation	A
4/17/97									digit well granulated & healy. Continue to monitor at 9/8hr	A
4/18/97									sc. D3 (L) hand healing well P Dlc from O/P sheet	BC
5/12/97									4ml Ket Bled 10ml CRBC/1	CF
5/15/97	4.54								Final Dental	M
7/24/97									Animal was brought to therapeutics under arce to be examined after having got arm caught in cage. There is a minor abrasion on the medial surface	JM

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Animal Number									Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P)*	STOOL (N.S.S.L.B)**	Observation	Init
7/24/97	cont.								of the wrist and mild swelling of the wrist. A. arm caught in cage. (L) minor trauma P. Rev in afternoon	
7/23/97	5.44									
7/24/97									rechecked in pm no swelling, no evidence of trauma, no indication for continued amputation.	

DATE	WEIGHT kg	PHYSICAL EXAM	
7/22/97	5.32	Temperature 97.7 °F	5. Musculoskeletal WNL
		HR 156 RR 36	6. Thorax Auscultation NAO
		Pulses	7. Abdominal Palpation NAO
		Gen. Body Condition L	8. Spleen WNL 9. Liver WNL
		1. Integument NAO	10. Lymph Nodes NAO
		2. Oral Cavity Semisolid	11. Urogenital -
		3. Eyes Clear 4. Ears clear	12. Rectal Palpation -

						6.5 N 50: Dosed with 0.6 cc ket.	
						T.U. Animal reported for trauma on L arm. Arm was caught on cage on 7/24/97. At this point no swelling present, only some redness and slightly irritated.	
						Perform 2 PE and did not find abnormalities. Took 0.3 cc for a zosstix test. Reported BUN of 30-40 mg/dl. Took 3.0 cc blood	

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Animal Number

Page

Date

WEIGHT (KG)

7B TEST

24-HR READING

48-HR READING

72-HR READING

APPELITE (G.F.P)*

HYDRATION (G.F.P)*

STOOL (N,SS,L,B)*

Observation

Init

7/28/97

(contaminated)

for 2 CBC + Chem Panel.

A: Azotemia + Ovarian Laceration/abscess.

P: Wait for Lab results. put animal in O.P. sheet + offer.

ORT + monitor daily

ES

7/29/97

G G C

So: BAC, Rept. liq. stool. Found

mixed quality stool. P: monitor

ES

7/30/97

G G N

So: BAC. Drank 1/4 ORT

ES

7/31/97

.5cc ket. arm red hair pulled

R

examined, slight azotemia on significant azotemia, CBC (7/29)

WBC 17,300 RBC 400,000 Hgb 15.5g Hct 45%

A mild leukocytosis produced

at 22:00 hours. P: Await (next)

update

ES

(exam 7/29) (examined 14 JUL 97)

A mild leukocytosis of leukocytes

P: (contaminated) to place

mean in water to inhibit growth

from drinking arm through

V3

8/27/97

Bled 3ml Serum Bank

AA

9/3/97

5.62

.5cc ket. Dental.

R

9/16/97

G C C

So: BAC, rptd for liquid stool

P: R/C, SS if diarrhea persists

BC

9/17/97

G C C

So: BAC, diarrhea persists P: Obtain R/C, SS

BC

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* G = good, F = fair, P = poor

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (N,SS,L,B)

Observation

Init

7/28/97

(Continued)

for 2 CBC + chem panel.
A: Azotemia + (O)arm Laccration/absctan.
P wait for Lab results. put
animal in O.P. sheet + offer
ORT + monitor daily

GL

7/29/97

G G ^{OR} C

80: BAC, Rept. liq. stool. Found
mixed quality stool. P. monitor

GL

7/30/97

G G N

80: BAC. Drank 1/4 ORT

GL

7/31/97

.5cc ket. also new blood count

R

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8/27/97

Bled 3ml Serum Bank

RA

9/3/97 562

.5cc ket. Dental.

R

9/16/97

G C C

So. BAC, rptd for liquid stool

P: R/C, SS if diarrhea persists

BC

9/17/97

G + C

So. BAC, diarrhea persists P: Obtain P/C, SO

BC

* G = good, F = fair, P = poor

** N = normal, SS = semi-solid, L = liquid, B = Bloody

Animal Number	California Primate Research Center										Page
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P)*	HYDRATION (G.F.P)*	STOOL (N,SS,L,B)**	Observation	Init	
9/19/97						G G E			SO: BAR, rptd for liquid stool P: Obtain R/c, SS today if it was not obtained yesterday	BC	
9/18/97									SO: Teak R/c, SS	BC	
9/20/97									SS (9/18). 1+ Blastocystis hominis A: equivocally significant stool isolate P: monitor	BC	
9/21/97						G G CC			SO: BAR reported for liq. stool. Unable to confirm. Cage closed. Hydration stable. P: monitor	BC	
9/23/97						G G CC			SO: BAR. Reported for liquid stool. Cage was closed. P: monitor	BC	
9/24/97						G C L			SO: BAR, rptd for liquid stool R/c (9/19) revealed no pathogens P: Begin Flagyl X 10 days if PI OK	BC	

Flagyl 280 6.0 Po QID
DRUG DOSE AMT. ROUTE FREQ.
 9/24 10/3/97
START END DAY
 28104 1606-5
AN# LOC.
 ADD COMMENTS:

9/25/97						G G CC			SO: BAR. Reported for liq. stool. Confirmed. On Tx P: monitor	BC
10/1/97									SO: SS, FFA (9/18) buty ⊖ P: Continue Flagyl	

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (N,SS,L,B)*

Observation

Init

10/9/97

G G N SS: BAR Re blood under the cage. No blood seen w/ no trauma. noted (every digest checked)

Ⓝ

10/11/97

G G SS: BAR reported blood under cage. Very scant amount of stool due to recent cage cleaning. Observed possible Kongs toy particles in feces. P: monitor

N
JV

11/3/97

5.92

11/24/97

G G SS: BAR rept ug stool actually SS when evaluated P: monitor

Ⓝ

11/25/97

G G L B: BR, liquid stool this am. monitor for further reports

Ⓝ

11/26/97

G G L B: BR liquid stool this am as per 11/25, request recheck of stool (11/26) if RBC, if budding yeast A: equivocal pathogenicity P: monitor, await RL results, if negative & no clinical problems, consider Rx w/ nystatin

Ⓝ

12/1/97

etc (11/26): negative

Ⓝ
1B

12/1/97

G G SS: BAR rept ug stool A: 1st recent rept P: monitor for persistence

Ⓝ

* G = good, F = fair, P = poor

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16

Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (N,SS,L,B)*

Observation

Init

10/2/97

G G N SS OD. BMT Re blood under the cage. No blood seen if no trauma noted (examination checked)

N

10/1/97

G G SS BAR report of stool under cage. Very recent amount of stool due to recent cage cleaning. Observed possible long hair particles in feces. P. monitor

N

11/3/97

5.92

IV

11/24/97

G G SS SS BAR report of stool actually SS when evaluated P. monitor

B

11/25/97

G G L SS BR liquid stool this am. mount of fecal report

B

11/26/97

G G L SS BR liquid stool this am as per 11/25 report re BAR of SS (11/25) if BAR is occurring again a squamous metaplasia P. monitor, alert P. monitor, if necessary a clinical protocol. control re symptoms

B

12/1/97

P/C (11/26): negative

1B

12/1/97

G G SS SS BAR report of stool A: recent report P. monitor for persistence

B

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** N = normal, SS = semi-solid, L = liquid, B = Bloody

2810A		California Primate Research Center										17	
Animal Number												Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation			Init	
12/11/97									G G L SS: BAR, Re: stool x 2nd cascade				
									Re SS on 12/11 w/ @ then			M	
1/20/98	5.43	M/R	-	-	-				Taken Dental				
		A/L	-	-	-							M	
4/24/98									G G L SS: BAR Re: lg stool - cong				
									A: 1st recent report P monitor				
									few persistence				
2/25/98									G G L SS: BAR Re: lg stool				
									G G A - unable to confirm			re	
2/26/98									G G L SS: BAR Re: lg stool				
									case recently missed				
									A: 3rd rept.				
									P: schedule R/C + SS				
									w/ SRA permission			SM	
2/24/98									G G L SS: BAR Took p/c, ss			AD	
2/28/98									G G L SS: BAR Re: lg stool confirmed				
									P: Monitor			VH	
3/2/98									G G L SS: BAR Re: liquid stool. Not				
									confirmed. P: Monitor.			DD	
3/3/98									G G L SS: BAR Re: liquid stool -				
									confirmed P: ✓ lab results			1B	
3/4/98									G G L SS: BAR Re: liquid stool - unable				
									to confirm P: see 3/3/98			1B	
									ss (2/24) no pathogens, no cells				
									p/c (2/26) negative			1B	

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Wrong Record re 2/25/98

mmu 28104

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G,F,P)*

HYDRATION (G,F,P)*

STOOL (N,SS,L,B)*

Observation

Init

3/4 cont'd

A: non pathogenic diarrhea
P: Consider empirical flagyl
-x

185

3/5/98

G G CC

SO: BAR. Re → liquid stool but not
able to confirm. A: Maintaining
well. P: Monitor and consider
treatment with flagyl.

3/6/98

G G L

SO: BAR, not sig stool - Conf.
AP: see 3/5/98.

87

3/18/98

5.38

8

4/2/98

G G h

SO: BAA Re HIGSTK
A: intermittent self
limiting non pathogenic
diarrhea

8

4/10/98

G G C

SO: BAR. Liquid stool
see 4/2

9

4/16/98

G G SS

SO: BAR. Re sig stool
A: Variable stool (occid
hydration) P: Monitor

10

4/17/98

G G L

SO: BAR. Re sig stool
AP see 4/10

10

4/17/98

SO: Took P/c, SS

10

4/19/98

G G L

SO: BAR. Re Ltg stool - conf
SS (4/7) 1+ E. histolytica
2+ NRE. A: E. histolytica

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Animal Number								Page		
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPE TITE (G.F.P.)	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init

4/8/98 P. Flazyl + Ucedoxin x 10d

5.4 Flazyl 210 234 Presol
 4/8 4/17 10
 START END DAY
 28102 1600 5
 AN# LOC

5.4 Ucedoxin 450 1.6 PC TID
 4/8 4/17 10
 START END DAY
 28102 1600 5
 AN# LOC

Monitor response

EC

4/9/98 O.Hcc ket for flazyl tx

JK

4/10/98 O.Hcc ket for flazyl tx

JK

4/10/98 66L 50: BARR A: No response

to Rx w/ P cont flazyl

Ucedoxin Rx for E. histio

Monitor response

JK

4/12/98 80: BARR Gave 0.6cc ketamine

IM for flazyl tx.

JK

4/14/98 80: R/C (4/7) w/eg

A: No further reports of diarrhea

P. Monitor

JK

5/1/98 .5 Ket Bled 20mls w/o 3150 PRES 02

JK

5/8/98 66L 80: BARR reported for left stool cup w/ 1st report, monitor p. prescription

.6cc Ket dental

JK

5/20/98 5.35 66L 80: BARR exp stool Aug 84

JK

5/22/98 6/30/98 .5cc ket Bled 20mls 3812 COROSI

JK

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Animal Number											Page
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P.)	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init	

7/20/98	5.55									PK
9/17/98	5.76								.5 Ket dental	PK
11/17/98	5.84									PK
11/18/98						G G L			SC: BSM regurgitated by lig. stool. confirmed. 1st day P: monitor for persistence	PK
11/20/98						G G L			SC: POAR. A: B ^{red} report of diarrhea on MH sheet P: consider P/C of SS	PK
11/23/98						G G L			SC: POAR A: Perforated Ig stool P. P/C of SS	PK
11/24/98						G G L			SC: on lig stool, regurg ok for samples on Jan 11/23	PK
11/23/98									Collect RC & SS.	JV
11/24/98									SC: SS (11/23) 2+ E W/analytical 1+ B. heminis A: E W/analytical	PK
<p>5.84 11/24/98 295 59 PO SS</p> <p>DRUG DOSE AMT. ROUTE FREQ.</p> <p>START END DAY</p> <p>28104 1606-5</p> <p>AN# LOC.</p> <p>ADD COMMENTS:</p>										
									Y-bacterial component P flag x 10d of monitor response	PK
11/25/98						G G L			SC: POAR A/P see 11/24	PK
11/26/98						G G L			SC: BAR. Re: lqd stl. cat A/P. see 11/24	JH
11/30/98									SC: P/C (11/23) neg. A: Appropriate antibiotic by monitor	PK
12/3/98						G G L			SC: POAR Re: finger trauma D ₂ hand has had abrasion	PK

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① LE. 11/24/98 JV.

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Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (N,SS,L,B)

Observation

Init

12/3/98

@ the ventral of lateral side of P₃ tip. P: No tx is indicated

11/199

G O CC

SO: BAR. Re: trauma-finger: scabbed-over
wounds on D2 @ hand, small on other hands also
A: Minor trauma to hands last report 12/3/98.
P: Monitor for recurrence.

1/14/99 5 66 1/4 - - -

0.5 cc ket, D₂/d

2/6/99

G G A

SO: BAR. Re: depression - animal quiet but threatened aggressively when provoked.
Appears healthy, normal responsiveness
A: Quiet attitude
P: Monitor.

3-18-99 5.67

3/20/99

G G 1/2

SO: BAR Re: liquid stool. Confirmed
P: Monitor

4/22/99

G G cc

SO: GRS. Re: liquid stool.
A: 1st recent report (since 3/20)
P: monitor.

5/9/99

G G L

SO: BAR Re: liquid stool - confirmed.
A: 1st recent report.
P Monitor

5-10-99

G G cc

SO: BAR, Re: liquid stool - unable to confirm, A/P: Monitor

5-11-99

G G cc

SO: BAR, Re liquid stool - unable to

* G = good, F = fair, P = poor
** N = normal, SS = semi-solid, L = liquid, B = Bloody

730620.01

28104		California Primate Research Center							22	
Animal Number									Page	
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init
5-11-99									confirm A: Primate 3 rd report P: all present + confirmed tomorrow ask Box RIC + SS	MP
5-12-99									C G CC SO BAR re liquid stool - unable to A: Primate unknown etiology P Ask Box RIC + SS 3/c negative	MP MP
5/19/99	5.19	7/2	-	-	-				0.5cc ket, Dextal	MP
6-15-99									5515-1-31 temperature 1.5cc ket → Thera, Am A03, w/c 2986	MP IF

DATE	WEIGHT kg	PHYSICAL EXAM	
6/15/99	5.44	Temperature <u>99.7</u> °F	5. Musculoskeletal <u>Normal</u>
		HR <u>160</u> RR <u>48</u>	6. Thorax Auscultation <u>Normal</u>
		Pulses <u>Good</u>	7. Abdominal Palpation <u>Normal</u>
		Gen. Body Condition <u>Good</u>	8. Spleen <u>Normal</u> 9. Liver <u>Normal</u>
		1. Integument <u>Normal</u>	10. Lymph Nodes <u>Normal</u>
		2. Oral Cavity <u>Normal</u>	11. Urogenital <u>Normal</u>
		3. Eyes <u>Normal</u> 4. Ears <u>Normal</u>	12. Rectal Palpation <u>—</u>

6-16-99									G G CC SO BAR, re: vomit - liquid stool - unable to confirm but probably associated with yesterday anesthesia A/P: Monitor	MP
6-21-99									G G CC SO BAR, re: finger trauma - confirmed Richard D's nail avulsed, no bone exposed A: Finger Trauma	

730620.01

* G = good, F = fair, P = poor
** N = normal, SS = semi-solid, L = liquid, B = Bloody

28104

California Primate Research Center

23

Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G.F.P.)

HYDRATION (G.F.P.)

STOOL (N,SS,L,B)

Observation

Init

6/23/99

G G G

SO: BAR. Re Finger trauma →
 Left D5 has trauma to
 the tip. No bone exposed
 & no bleeding
 A. Minor trauma to finger
 tip
 P. No treatment needed
 at this time. Monitor.

MJC

6/24/99

SO: Finger clean w/ discharge
 NP: Healing well, no tx needed
 at this time. Monitor

JW

JW

7-20-99

5.60

ZF

9/14/99

G G L

SO: BAN. Reported gr. liq. stool.
 confirmed. Adequate hydration.
 1st day on report, a superficial
 cut on D5 (D-hand) at the
 tip of B. Clean. No further
 cleaning needed
 P: monitor persistence.

JW

9-16-99

G G L

SO: BAR. confirmed liquid
 stool. A 2nd day on report
 liq stool P. monitor

⊕

9-17-99

G G L

SO: BAN. Reported gr. liq stool.
 confirmed. 2nd day on report

* G = good, F = fair, P = poor

** N = normal, SS = semi-solid, L = liquid, B = Bloody

D4681 (2/90)

730620.01

28104		California Primate Research Center						24		
Animal Number								Page		
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P.)	HYDRATION (G.F.P.)	STOOL (N.S.S.LB)	Observation	Init
	conf								P: 2 of leg joints on weekend, collect R/C, SS on Monday	PD
9/18/99					GGL				SO: BAR conf. R/C, SS P: see 9/17/99	PD
9/22/99					GGL				SO: BAR reported for leg. stuff confirmed. Take R/C, SS	
9/20/99	5.45								P: awaits for lab results .5 cc kit dental	PD DH
9/29/99					GGL				SO: BAR	PD
9/22/99									SB WO # 4293	my
9/20/99									SS: C-alk, C-PS, low Tichonaxi low estradiol, Coprol/Galact/Alc	de
9/20/99									RC: SSYAO	PD
9/23/99					GGL				SO: BAR 2.0000 gms from CP	PD 3 ZF
11-15-99	5.75									
11/18/99					GGL				SO: BAR. Report for leg. stuff. Confirmed. 1st report after 2 months. P: monitor	PD
12/2/99					GGL				SO: BAR report for finger trauma. Confirmed. D4 on (K) hand get chewed at P3 exposing bone. It is a fresh wound. Give 0.4 mg ketamine. Amputated digit at P1 & P2 junction, closed and applied a	

* G = good, F = fair, P = poor

** N = normal, SS = semi-solid, L = liquid, B = Bloody

D4681 (2-90)

730620.01

① Wrong date. Should be 22. PD 9/18/99

Animal Number											Page
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE	HYDRATION (G.F.P.)	STOOL (N,SS,L,B)	Observation	Init	

cont)

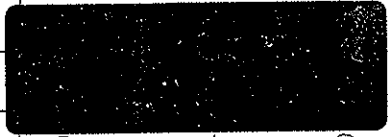
PPG
 DRUG DOSE AMT. ROUTE FREQ.
 12/2 12/4 3
 START END DAY
 28104 1666. 80
 AN. # LOC.

pressured tube hd. frame w
 dose of 1.0 mg PPG.
 A: Digestive trauma
 P: Loose hd on for 48 hours. L hd
 secondary and assess to come off

12/3/99						G	G	CC	SO BAR - bds intact A) Digestive trauma P) A bds 12/4 & assess to 20	LD
12/4/99						G	G	N	SO: BAR sutured. 1st part removed 2nd suture intact. (come off)	
12/5/99						G	G	N	SO: BAR - animal has removed 2 sutures from lateral aspect of amp site, but remains closed	LP
12/6/99						G	G	N	SO: BAR - sutures intact Heals well. P) ✓ sutures 12/7 & assess to PIC	LD
12/7/99						G	G	N	SO: BAR - sutures intact - good healing A) Resolved Dig. + trauma P) DIC from OP	
1/25/00	5.62									
1/26/00						G	G	CC	SO: BAR. Unable to confirm liquid stool report due to recent CC A: Possible d+ P: CTM AHS	LP
3/20/00	5.39									
4/5/00						G	G	N	SO BAR - on report for trauma	LD

730620.01

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 ** N = normal, SS = semi-solid, L = liquid, B = Bloody

Animal Number								Page		
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G.F.P)*	HYDRATION (G.F.P)*	STOOL (N,SS,L,B)	Observation	Init
									hand. small abrasion to ① hand. no need for tx. P monitor	
4/7/00									.5cc ket Sal 7474 CRB01	AW
5/15/00	5.44								0.7cc ket, Dey fed	EW
7/12/00	5.37									EW
9/18/00	5.44	M/P	-	-	-				0.5cc ket. Dey fed	EW
11/9/00	5.76									EW
11/20/00									0.5cc ket im, 0.22cc ampicillin im 0.5cc Aziclin 5g + 0.22cc Aziclinazole im for wati scan	EW
11/22/00										EW
1/16/01	5.53	M/L	-	-	-				0.7 cc ket. Dey fed	EW
2/28/01									MO → SW 1604-34 MO # 9538	RSD
3/13/01	5.56									SP
3/21/01								G G L	SO BAR. rept ug stool. + confirmed ret recent rept P monitor	L2
3/22/01								G G L	SO BAR. Confirmed liq. stool. 2nd day. P. monitor for persistence	AW
03-25-01								G G L	SO:BAR Confirmed liquid stool report A: 3rd day P: Get perm for RC+SS if it persists	AW
03-26-01								G G B	SO:BAR Collected RC + SS to submit to	AW

* G = good, F = fair, P = poor
** N = normal, SS = semi-solid, L = liquid, B = Bloody

730620.01

Animal Number							Page			
Date	WEIGHT (KG)	TB TEST	24-HR READING	48-HR READING	72-HR READING	APPETITE (G,F,P)*	HYDRATION (G,F,P)*	STOOL (N,SS,L,B)**	Observation	Init

03 26 01 (cont)

Enrofloxacin 25mg 1.23cc IM SID
 DRUG DOSE AMT. ROUTE FREQ.
 03 26 01 03 28 05
 START END DAY
 28 04 16 05 1
 AN# LOC.

ADD COMMENTS:

Other labs Permission granted to start on Enrofloxacin. A Presumptive Shigella, bloody liquid stool 1 vomit, que ease 2 5 days

3/27/01									SS	SO BAR - normal lg stool		
										P. COM 7X	LB	
3/28/01										GC (3/26) no parasites no cells	SS	
3/29/01										GC (3/26) 21 cells		
										A. salmonic acid 27 P. monilia	SS	
4/4/01									G G	GC	SO BAR, re depressed, little but good but vomit and stool when disturbed eat well, good hydration	
										A/P. b/antec	SS	
04-08-01									G G	SS	SO BAR Unconfirmed liquid stool report	
										P. COM aHS	LB	
4/9/01									G G	GC	SO BAR. Unconfirmed lg. stool. Heavy	
										case.		
										3 months	SS	
4/12/01										.8cc KBT → surgery w/ #7066, A2403	SS	
4/12/01										nubromy repair today animal		
										Moral done 1604-34 to H1332-2		
										surgery today, see report	SS	

730620.01

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 ** N = normal, SS = semi-solid, L = liquid, B = Bloody

Animal Number _____ Page _____

Date _____

WEIGHT (KG) _____

TB TEST _____

24-HR READING _____

48-HR READING _____

72-HR READING _____

APPETITE _____

HYDRATION (G.F.P.) _____

STOOL (N,SS,L,B) _____

Observation _____

Init _____

~~Dextro~~ DRUG 0.11 DOSE 0.38 AMT. IM ROUTE BID FREQ

4/12/01 4/13 2
START END DAY

28104 1333-2
AN.# LOC

ADD COMMENTS:

~~Cephalic~~ DRUG 0.12 DOSE 0.75 AMT. IM ROUTE TID FREQ

4/12/01 4/17 5
START END DAY

28104 1333-2
AN.# LOC

ADD COMMENTS:

4/13/01									G G A	SC BAR, st interact, very active, doing well. A good position	EA
4/14/01									F G N	SC BAR, did not eat, well color	EA
4/15/01									F G N	SC BAR st interact.	EA
4-19-01										Discharge to home cage + all sheet	EA
4/25/01									G G M	SC BAR. unconfirmed report of depression. Quiet, active and very responsive once provoked.	EA
										P. monitor	EA

730620.01

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28104

California Primate Research Center

29

Animal Number

Page

Date

WEIGHT (KG)

TB TEST

24-HR READING

48-HR READING

72-HR READING

APPETITE (G,F,P)*

HYDRATION (G,F,P)*

STOOL (N,SS,L,B)**

Observation

Init

4.26.01

4.87kg

Ret. 6 ~~ent~~ Necropsy RMAD02 w/ 7322

①

730620.01

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** N = normal, SS = semi-solid, L = liquid, B = Bloody

2021

VIRAL PRECAUTION

CALIFORNIA PRIMATE RESEARCH CENTER

I.D. 7464 PROJECT CODE AMA03

ANIMAL I.D. MCJ 78104

HEMATOLOGY

DATE OF SAMPLE 4/12/01

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 78104 - 34
HOME ROOM _____ CAGE _____

YR _____ MO 04 KG _____
AGE _____ WEIGHT _____

PROEDURE IS: _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: <u>Y-2</u>	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES
HOSPITALIZED NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> <u>1925</u> - <u>2</u> ROOM CAGE	<input type="checkbox"/> 2-COLOR FACS CD4 = _____ / μ l <input type="checkbox"/> 3-COLOR FACS CD8 = _____ / μ l CD4/CD8 RATIO = _____

BLEEDING CONDITIONS: Squeezed - limb pulled Caught on run Fasted _____ hrs Anesthetized Other _____

COMPLETE BLOOD COUNT: ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN

<input checked="" type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC _____ X $10^3/\mu$ l			PLATELETS		
<input type="checkbox"/> CORRECTED WBC _____ X $10^3/\mu$ l			<input type="checkbox"/>			<input type="checkbox"/> ADEQUATE		
WBC	<u>62</u>	X $10^3/\mu$ l	DIFFERENTIAL	%	/ μ l	<input type="checkbox"/> DECREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3		
PEC	<u>437</u>	X $10^6/\mu$ l	METAMYELOCYTES			<input type="checkbox"/> INCREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3		
HEMOGLOBIN	<u>9.3</u>	gm/dl	BAND NEUTROPHILS			<input type="checkbox"/> LARGE PLATELETS		
HEMATOCRIT	<u>30.8</u>	%	SEG. NEUTROPHILS			<input type="checkbox"/> CLUMPED		
MCV	<u>71</u>	fl	LYMPHOCYTES			ERYTHROCYTE MORPHOLOGY		
MCH	<u>21.3</u>	pg	MONOCYTES			<input type="checkbox"/> ESSENTIALLY NORMAL		
MCHC	<u>30.2</u>	pg/fl	EOSINOPHILS			<input type="checkbox"/> HYPOCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
PLATELETS	<u>304</u>	X $10^5/\mu$ l	BASOPHILS			<input type="checkbox"/> POLYCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> RETICULOCYTES	%	X $10^5/\mu$ l	OTHER			<input type="checkbox"/> LEPTOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC			<input type="checkbox"/> POIKILOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input checked="" type="checkbox"/> PLASMA PROTEIN	<u>6.3</u>	gm/dl	COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE <input type="checkbox"/> PREDILUTE			<input type="checkbox"/> ANISOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
PLASMA COLOR:						<input type="checkbox"/> ROULEAUX <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input checked="" type="checkbox"/> NO ABNORMALITIES								
<input type="checkbox"/> HEMOLYZED								
<input type="checkbox"/> ICTERIC								
<input type="checkbox"/> LIPEMIC								
<input type="checkbox"/> FIBRINOGEN		mg/dl						

REPORTED BY: _____

REPORT DATE: 4-12-01

946X, AMA03
 I.D. PROJECT CODE

CALIFORNIA PRIMATE
 RESEARCH CENTER

MCA 28104
 ANIMAL I.D.

SURGERY
 POST-OPERATIVE
 RECORD

INVESTIGATOR _____ REQUESTOR _____
 ANIMAL DATA: 1604 - 34
 ROOM CAGE

4, 12, 01
 DATE OF SURGERY
 YR MO KG
 AGE WEIGHT

WORKORDER # 7060 PROCEDURE: Mund surgery
 1333-2

IMMEDIATE POST-ANESTHETIC

TIME	SITTING UP	HEAT LAMP	EXTUBATION	TURNED	OBSERVATION AND TREATMENTS	INIT.
5:30	no	yes	yes		legs down	
5:45	no	yes		yes	leg down	
6:00	no	yes		yes	leg down	
6:30	yes	yes		yes		
7:15	yes	yes				
8:00	yes	yes				
8:30	yes	yes				

SUBSEQUENT DAYS POST-OP
 All Entries Must Be Dated, Timed, and Initialed

DATE	TIME	APPETITE	HYD	STOOL	ATTITUDE	INCISION CONDITION	OBSERVATION AND TREATMENTS	INIT.
7/3	7:30	en	en	A	BAR	COI		

SURGERY POST - OPERATIVE RECORD

CALIFORNIA PRIMATE RESEARCH CENTER INTERVENTION / SURGERY	DATA SERVICES USE ONLY			ANIMAL		DATE OF EVENT	
	E	V	FORM	SEQUENCE	SP	ID#	MO. DAY YR
		056			MCJ 28104		4 / 12 / 01

PROCEDURE: <i>Neurosurgery</i>	<input type="checkbox"/> HEALTH CARE Charge to Center <input checked="" type="checkbox"/> EXPERIMENTAL Charge to ID# <i>1066</i> Work Order# <i>7066</i>	ROOM: <i>1604</i>	AGE:
REQUESTOR:		CAGE: <i>34</i>	SEX:
INVESTIGATOR:		PROJECT: <i>AMAC3</i>	WT. <i>5.6</i> KG

LINE		SNOMED CODES	CODED BY: <i>JFW</i>	SNOMED TERMS (OPTIONAL)
01	T-	<i>Y 1 6 0 0</i>	<i>P-</i>	<i>1 2 7 5</i>
02	T-		<i>P-</i>	<i>insertion or implantation of therapeutic device (NOS)</i>
03	T-		<i>P-</i>	<i>Head (NOS)</i>

DESCRIPTION OF PROCEDURES PERFORMED

1/ The animal was anesthetized and placed in the stereotaxic apparatus

2/ The skull was exposed and two craniotomies were performed

3/ Electrophysiological recordings and tracer injections were done at two different locations

4/ The wound was closed in 4 layers

ANESTHETICS, IV FLUIDS, CONCURRENT MEDICATION					
	SUBSTANCE	DOSE	UNITS	TOTAL	ROUTE
1	<i>Ketamine</i>				
2	<i>Atropine</i>				
3	<i>isob²</i>				
4	<i>LDS</i>				

POSTOPERATIVE CARE AND CONDITION

TIME IN:

TIME OUT:

Cefazolin TID x 5 days
Buprenorphine BID x 2 days

SURGEON:	ASSISTANT:	ANESTHETIST:
----------	------------	--------------

791003.01

ANESTHESIA RECORD

Animal #: MCI 2810.4

Date: 4/1/01

Procedure: neurosurgery

Time	0	5	15	30	45	1hr	15	30
	9:25	9:30	9:45	10:00	10:15	10:30	10:45	11:00
HR	109	112	102	107	102	102	97	102
PO2		97	93	99	99	99	99	99
ETCO2	27	30	28	30	31	32	31	32
RR		10	10	9	9	9	12	10
MAC Iso	1.9	1.2	1.1	0.80	0.77	0.75	0.74	0.74
Temp		35.4	35.4	35.7	36.1	36.4	36.5	36.8
BP Syst Dopler	30	40	38	40	40	40	40	40
MAP								
BP Syst/Diast Dinamap								
Fluids -- rate/total	semi/hr	semi/hr						
Observ	started pentamyl @ 37ml/hr	1/2 1.50 0.37 ml Gazdar Gee					0.5 ml Atropine Gee	
	URS + 25um/hr							

ANESTHESIA RECORD

Animal #: MCF 28104

Date: 4/12/01

Procedure: Microsurgery

Time	45 min	2hr	15	30	45	3hr	15	30
	11:15	11:30	11:45	12:00 P	12:15 P	12:30 P	12:45 P	1:00 P
HR	103	103	102	100	100	103	103	103
SPO2	99	99	99	99	99	99	99	99
ETCO2	33	33	33	34	35	35	36	36
RR	10	11	11	11	10	10	10	10
MAC Iso	0.74	0.72	0.72	0.72	0.74	0.74	0.73	0.75
Temp	36.9	37.0	37.0	37.0	37	37.1	37.1	37
BP Syst Dopler	44	43	43	42	40	42	42	42
MAP di-namap								
BP Syst/Diast Dinamap								
Fluids -- rate/total								
Observ					0.5 ml Atropine Cyan			
					0.37 ml Cefazolin Cyan			

ANESTHESIA RECORD

Animal #: MCY 28104

Date: 4/12/01

Procedure: Mindarray

Time	45	4hr	15	30	45	5hr	15	30
	1:15 P	1:30 P	1:45 P	2:00 P	2:15 P	2:30 P	2:45	3:00
HR	102	100	100	98	100	99	100	100
SPO2	99	99	99	99	99	99	99	99
ETCO2	37	38	38	36	35	34	34	32
RR	10	10	10	12	12	12	12	12
MAC Iso	0.75	0.74	0.75	0.75	1.1	0.95	0.94	0.95
Temp	37.1	37.0	37.0	37.0	37.1	37.0	37.0	37.0
BP Syst Dopler	44	45	44	45	43	45	47	48
MAP di-namap								
BP Syst/Diast Dinamap								
Fluids -- rate/total								
Observ					0.5 ml Atropine 5 ml 0.3 ml fentanyl 5 ml			

ANESTHESIA RECORD

Animal #: _____

Date: _____

Procedure: _____

Time	0	5	15	30	45	1hr	15	30
	5:00							
HR	100							
SpO2	98							
ETCO2	32							
RR	12							
MAC Iso	0.97							
Temp	37.3							
BP Syst Dopler								
MAP								
BP Syst/Diast Dinamap	44							
Fluids -- rate/total								
	576ml							
	ferdyt							
Observ	32.34ml							

ANESTHESIA RECORD

Animal #: MCF 28104

Date: 4/12/01

Procedure: Microsurgery

Time	45	6hr	15	30	45	7hr	
	3:15P	3:30P	3:45P	4:00P	4:15P	4:30P	4:45P
HR	100	97	95	95	97	100	100
SPO2	99	99	99	99	99	99	99
ETCO2	35	36	34	34	30	31	31
RR	10	10	11	11	12	12	12
MAC Iso	1.0	0.97	1.0	0.95	0.97	0.97	0.97
Temp	37.0	36.8	36.6	36.5	36.5	36.7	37.1
BP Syst Dopler	46	44	44	44	48	48	44
MAP Di-namap							
BP Syst/Diast Dinamap							
Fluids -- rate/total							
Observ				0.5 ml Atropine given.			

**CALIFORNIA PRIMATE
RESEARCH CENTER
MICROBIOLOGY**

633

MCU 28104
ANIMAL I.D.
03.26.01
DATE OF SAMPLE

I.D. _____ PROJECT CODE _____

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1604 - 34
HOME ROOM CAGE

M SEX YR MO KG
AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL _____

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

HOSPITALIZED NO YES
ROOM _____ CAGE _____

PRIOR THERAPY NO YES
LIST ALL AGENTS:

SOURCE OF SPECIMEN(S) *fecal*

CULTURES REQUESTED	NEGATIVE RESULT	
	NEGATIVE	NO GROWTH
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> CAMPYLOBACTER		
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)		
<input type="checkbox"/> AEROBIC		
<input type="checkbox"/> ANAEROBIC		
<input type="checkbox"/> FUNGI		
<input type="checkbox"/> OTHER, _____		

DIRECT MICROSCOPIC EXAMINATION

ORGANISMS IDENTIFIED

1. 3/28 2+ Campylobacter Coli
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	AZITHROMYCIN (AZM15)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 3/28/01

CLINICAL MICROBIOLOGY

640

mcy 2810E

I.D. CRB01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

ANIMAL I.D.

9/20/99 DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1606 - 62
ROOM CAGE

M SEX 9 YR 1 MO 5.6 KG WEIGHT
AGE

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN <input checked="" type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____ <input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input checked="" type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER _____
PROCEDURE REQUESTED: <input checked="" type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> CONCENTRATION SEDIMENTATION <input type="checkbox"/> FORMALIN-ETHYLACETATE FLOTATION <input type="checkbox"/> ZINC SULFATE	

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>Liquid</u>	COLOR: <u>brown</u>
EXAMINATION	<input checked="" type="checkbox"/> RBC: _____ <input checked="" type="checkbox"/> WBC: _____ <input type="checkbox"/> OTHER: _____	

<input type="checkbox"/>	Balantidium coli	<input type="checkbox"/>	Entamoeba histolytica
<input type="checkbox"/>	Blastocystis hominis	<input type="checkbox"/>	Giardia lamblia
<input type="checkbox"/>	Chilomastix mesnili	<input type="checkbox"/>	Hexamita pitheci
<input type="checkbox"/>	Endolimax nana	<input type="checkbox"/>	Iodamoeba butschlii
<input type="checkbox"/>	Entamoeba NOS	<u>few</u>	Trichomonas, NOS
<u>few</u>	Entamoeba coli		Trichuris trichiura
<input type="checkbox"/>	Entamoeba hartmanni	<input type="checkbox"/>	No Parasites Seen
<input type="checkbox"/>	Cryptosporidium IFA	<input type="checkbox"/>	Acid fast bacilli
<input type="checkbox"/>	Giardia IFA	<input type="checkbox"/>	Budding yeast

REPORTED BY: _____

REPORT DATE: 9.20.99
9.22.99

CLINICAL PARASITOLOGY

252

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

MCU 28104
ANIMAL I.D.

03.26.01
DATE OF SAMPLE

I.D. PROJECT CODE

INVESTIGATOR REQUESTOR

ANIMAL DATA: 1604 - 301
ROOM CAGE

PROEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT SEX EXPERIMENTAL
YR MO KG
AGE WEIGHT

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> ROOM CAGE	PRIOR THERAPY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER
PROCEDURE REQUESTED: <input checked="" type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> CONCENTRATION SEDIMENTATION <input type="checkbox"/> FORMALIN-ETHYLACETATE FLOTATION <input type="checkbox"/> ZINC SULFATE	<input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <i>Liquid</i>	COLOR: <i>Brown</i>
EXAMINATION	<input type="checkbox"/> RBC: <i>0</i> <input type="checkbox"/> WBC: <i>0</i>	<input type="checkbox"/> OTHER:

Balantidium coli	Entamoeba histolytica
Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	Trichuris trichiura
Entamoeba hartmanni	No Parasites Seen
Cryptosporidium IFA	Acid fast bacilli
Giardia IFA	Budding yeast

REPORT:

REPORT DATE: 3/27/01

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

1774

I.D. CP201
PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER MICROBIOLOGY

MCY 28104
ANIMAL I.D.

INVESTIGATOR _____ REQUESTOR _____

9/20/99
DATE OF SAMPLE

ANIMAL DATA: 1606-600
HOME ROOM CAGE

M 9 YR 1 MO 5.6 KG
SEX AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	ROOM _____ CAGE _____	PRIORITY THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: _____ SOURCE OF SPECIMEN(S) <u>P/C</u>
---	-----------------------	--

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/> CAMPYLOBACTER	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER _____			

ORGANISMS IDENTIFIED	
1	
2	
3	
4	
5	
6	
7	
8	

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AM 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	AZITHRO-MYCIN (AZI 15)	CEFAZOLIN (CZ 30)	CEFTRI-AXONE (CRO 30)	CLINDA-MYCIN (CC 7)	DOXY-CYCLINE (D 30)	ENRO-FLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCO-MYCIN (VA 30)

COMMENTS: _____
REPORTED BY: _____

REPORT DATE: 9.23.99

CLINICAL MICROBIOLOGY

White - Animal's Chart Yellow - Laboratory Pink - Requestor Goldenrod - Clinical Pathology

1365

I.D. CRBOT PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. May 28 104

INVESTIGATOR _____ REQUESTOR _____

CLINICAL BIOCHEMISTRY

DATE OF SAMPLE 6/15/99

ANIMAL DATA: 16066 - 60
HOME ROOM _____ CAGE _____

SEX M AGE 8 YR 10 MO WEIGHT 5.2 KG

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL _____

CLINICAL SIGNS/PROBLEMS: <u>no project P.E.</u>	PRIOR THERAPY ? NO <input type="checkbox"/> YES <input type="checkbox"/> LIST ALL AGENTS
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> ROOM _____ CAGE _____	TIME DRAWN _____ AM PM TEMP _____ °C

DIETARY STATUS: UNKNOWN FED FASTED HOURS _____ COMMENTS to UMTH. 6.16.99 JW

SAMPLE: SERUM HEPARINIZED PLASMA CITRATED BLOOD HEPARINIZED BLOOD URINE SAMPLE COLOR: NO ABNORMALITIES HEMOLYZED ICTERIC LIPEMIC

PANEL: NOVA PP2 PP3 SPECIAL PANELS Chem 20 (ARRANGE WITH LAB) CLINICAL SERUM BANK BOX _____ SLOT _____

#	✓	TEST	RESULT	UNITS	#	✓	TEST	RESULT	UNITS	#	✓	TEST	TIME	TIME	TIME	TIME	UNITS
1		SODIUM (S,HP)	148	mM/L	14		γGT(S,HP)	42	U/L	25		NOVA					
2		POTASSIUM (S,HP)	4.2	mM/L	15		CPK (S,HP)	1181	U/L			PH					pH unit
3		CHLORIDE (S,HP)	113	mM/L	16		AST [SGOT] (S,HP)	25	U/L			CO ₂ -pCO ₂					mm Hg
4		TCO ₂ (S,HP)	28	mM/L	17		BILI TOTAL(S,HP)	0.2	mg/dl			pO ₂					mm Hg
		ANION GAP 3+4-(1+2)	11	mM/L	18		DIRECT		mg/dl			HCT					%
5		CALCIUM (S,HP)	9.7	mg/dl	19		INDIRECT		mg/dl			SODIUM					mM/L
6		PHOSPHOROUS (S)	3.0	mg/dl	20		LDH (S,HP)	166	U/L			POTASSIUM					mM/L
7		CREATININE (S,HP)	0.7	mg/dl	21		CHOLESTEROL (S,HP)	123	mg/dl			CHLORIDE					mM/L
8		BUN (S,HP)	26	mg/dl	22		TRIGLYCERIDES	55	mg/dl			CALCIUM					mM/L
9		GLUCOSE (S,P,HP)	61	mg/dl	23		*OTHER (SPECIFY)					GLUCOSE					mg/dl
10		ALT [SGPT] (S,HP)	34	U/L	24		*CLOTTING PANEL	PATIENT	CONTROL			HGB					g/dl
11		ALK P TASE (S,HP)	181	U/L			PROTHROMBIN TIME		SEC			BE-ECF					mM/L
12		TOTAL PROTEIN (S)	7.6	gm/dl			PTT		SEC			BASE BALANCE					mM/L
13		ALBUMIN	3.5	gm/dl			FDP		µg/ml			BICARB					mM/L
												TCO ₂					mM/L
												O ₂ SAT					%
												ANION GAP					
												OSMO					mOsm/kg

* CALL BEFORE DRAWING SAMPLE

REPORTED BY _____ DATE 6.17.99
PERFORMED BY: CPCR VMTH OTHER

CLINICAL BIOCHEMISTRY

White - Animal's Chart (9/95)

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinical Pathologist

3288

VIRAL PRECAUTION

8724 CR201
AMAD3
I.D. PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

MOY 28/104
ANIMAL I.D.

HEMATOLOGY

6/15/99
DATE OF SAMPLE

INVESTIGATOR / REQUESTOR

ANIMAL DATA: 5611/10302 - 6
HOME ROOM CAGE

M SEX 8 YR 10 MO 5.2 KG WEIGHT
AGE

PRODEURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	<input type="checkbox"/> 2-COLOR FACS CD4 = / μ l <input type="checkbox"/> 3-COLOR FACS CD8 = / μ l CD4/CD8 RATIO =
ROOM CAGE	

BLEEDING CONDITIONS: Squeezed - limb pulled Caught on run Fasted 16 hrs Anesthetized Other

COMPLETE BLOOD COUNT: ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN

<input checked="" type="checkbox"/> ELECTRONIC CELL COUNT		<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC _____ X 10 ³ / μ l		PLATELETS <input type="checkbox"/> ADEQUATE <input type="checkbox"/> DECREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> INCREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> LARGE PLATELETS <input type="checkbox"/> CLUMPED
<input type="checkbox"/> CORRECTED WBC _____ X 10 ³ / μ l		DIFFERENTIAL % / μ l METAMYELOCYTES BAND NEUTROPHILS SEG. NEUTROPHILS LYMPHOCYTES MONOCYTES EOSINOPHILS BASOPHILS OTHER		
WBC	<u>6.5</u> X 10 ³ / μ l			ERYTHROCYTE MORPHOLOGY <input type="checkbox"/> ESSENTIALLY NORMAL <input type="checkbox"/> HYPOCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4 <input type="checkbox"/> POLYCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4 <input type="checkbox"/> LEPTOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4 <input type="checkbox"/> POIKILOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4 <input type="checkbox"/> ANISOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4 <input type="checkbox"/> ROULEAUX <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4
FBC	<u>4.75</u> X 10 ⁶ / μ l			
HEMOGLOBIN	<u>10.4</u> gm/dl			
HEMATOCRIT	<u>32.7</u> %			
MCV	<u>69</u> fl			
MCH	<u>21.9</u> pg			
MCHC	<u>31.8</u> pg/fl			
PLATELETS	<u>3,15</u> X 10 ⁵ / μ l			
<input type="checkbox"/> RETICULOCYTES	% _____ X 10 ⁵ / μ l			
<input type="checkbox"/> PCV (CENTRIFUGED)	%	<input type="checkbox"/> NRBC/100 WBC		
<input type="checkbox"/> PLASMA PROTEIN	gm/dl	COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE <input type="checkbox"/> PREDILUTE		
PLASMA COLOR: <input type="checkbox"/> NO ABNORMALITIES <input type="checkbox"/> HEMOLYZED <input type="checkbox"/> ICTERIC <input type="checkbox"/> LPEMIC				
<input type="checkbox"/> FIBRINOGEN	mg/dl			

115799
4

REPORTED BY: _____

REPORT DATE: 6/15/99

950

I.D. 8724 PROJECT CODE CRB01

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. MCY 28104

INVESTIGATOR _____ REQUESTOR _____

MICROBIOLOGY

DATE OF SAMPLE 5-12-99

ANIMAL DATA: HOME 1606 ROOM 60 CAGE _____

SEX M

AGE 8 YR MO

WEIGHT 5.6 KG

PROCEDURE IS: _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL _____

CLINICAL SIGNS / PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/>	SOURCE OF SPECIMEN(S) <u>Rectal swab</u>

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS		<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> CAMPYLOBACTER	<input checked="" type="checkbox"/>		
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	AZITHROMYCIN (AZM 15)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CHO 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 5.17.99

CLINICAL MICROBIOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinical Pathology

I.D. 8724, CRB01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

ANIMAL I.D. MCY 28104

DATE OF SAMPLE 5-12-99

INVESTIGATOR _____ REQUESTOR #1

ANIMAL DATA: 1606 - 6
ROOM CAGE

SEX M ♂ YR _____ MO _____ WEIGHT 56 KG
AGE _____

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____

SEX EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE _____	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____
PROCEDURE REQUESTED: <input checked="" type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> CONCENTRATION SEDIMENTATION <input type="checkbox"/> FORMALIN-ETHYLACETATE FLOTATION <input type="checkbox"/> ZINC SULFATE <input type="checkbox"/>	<input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER _____

FOR LABORATORY USE ONLY

APPEARANCE EXAMINATION	CONSISTENCY: <u>Liquid</u>	COLOR: <u>Brown</u>
	<input type="checkbox"/> RBC: _____	<input type="checkbox"/> WBC: _____
	<input type="checkbox"/> OTHER: _____	

<input type="checkbox"/>	Balantidium coli	<input type="checkbox"/>	Entamoeba histolytica
<input type="checkbox"/>	Blastocystis hominis	<input type="checkbox"/>	Giardia lamblia
<input type="checkbox"/>	Chilomastix mesnili	<input type="checkbox"/>	Hexamita pitheci
<input type="checkbox"/>	Endolimax nana	<input type="checkbox"/>	Iodamoeba butschlii
<input type="checkbox"/>	Entamoeba NOS	<input type="checkbox"/>	Trichomonas, NOS
<input type="checkbox"/>	Entamoeba coli	<input type="checkbox"/>	Trichuris trichiura
<input type="checkbox"/>	Entamoeba hartmanni	<input checked="" type="checkbox"/>	No Parasites Seen
<input type="checkbox"/>	Cryptosporidium IFA	<input type="checkbox"/>	Acid fast bacilli
<input type="checkbox"/>	Giardia IFA	<input type="checkbox"/>	Budding yeast

REPORTED BY: _____ REPORT DATE: 5/12/99

CLINICAL PARASITOLOGY

**CALIFORNIA PRIMATE RESEARCH CENTER
PHYSICAL EXAM AND EVALUATION/HEALTH CERTIFICATE**

SPECIES/ID# MACY 20104 LOCATION 54/1006 DATE 6/15/99
 REASON FOR EXAM: ROUTINE PRE-SHIPMENT QU SCREEN EXPERIMENTAL
 OTHER PRR PROJECT

ORGAN SYSTEMS: NAO=NO ABNORMALITIES OBSERVED A=ABNORMAL NE=NOT EXAMINED											
1. INTEGUMENT	<input checked="" type="radio"/> NAO	A	NE	6. SPLEEN/L. NODES	<input checked="" type="radio"/> NAO	A	NE				
2. ORAL CAVITY	<input checked="" type="radio"/> NAO	A	NE	7. RESPIRATORY	<input checked="" type="radio"/> NAO	A	NE				
3. EYES	<input checked="" type="radio"/> NAO	A	NE	8. DIGESTIVE	<input checked="" type="radio"/> NAO	A	NE				
4. MUSCULOSKELET.	<input checked="" type="radio"/> NAO	A	NE	9. UROGENITAL	<input checked="" type="radio"/> NAO	A	NE				
5. CIRCULATORY	<input checked="" type="radio"/> NAO	A	NE	10. OTHER	NAO	A	NE				
FEMORAL VESSELS: Right <u>Good</u>				Left <u>Good</u>							
WEIGHT (kg) <u>5.44</u>				DATE _____							
ABNORMAL FINDINGS:											

REPRODUCTIVE EVALUATION	
	UTERUS: NAO A NE
	ADHESIONS: MINOR MODERATE SEVERE
	PREGNANCY STATUS:
	PREGNANT:
	GL (mm)= _____
	BPD (mm)= _____
FL (mm)= _____	
E/FHR (bpm)= _____	
Gest. Age (days) _____	
NONPREGNANT:	
UTERINE SIZE _____	
CONTOUR/SHAPE	

GENDER: M F	

REPRODUCTIVELY SOUND
 AREPRODUCTIVE
 RE-EVALUATE
 NOT EVALUATED
COMMENTS:

OVERALL CONDITION:
 EXCELLENT
 GOOD
 FAIR
 POOR
RECOMMENDATION: I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THIS ANIMAL HAS BEEN EXAMINED AND IS :
 SATISFACTORY FOR SHIPMENT COMMENT: _____
 SATISFACTORY FOR PROJECT COMMENT: _____
 OTHER COMMENT: _____
DATE: 6/15/99 **EXAMINING VETERINARIAN:** _____

340

I.D. 8724 PROJECT CODE CRB01

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

ANIMAL I.D. MEY 28104

INVESTIGATOR _____ REQUESTOR _____

DATE OF SAMPLE 2/12/11

ANIMAL DATA: 100 - 6
ROOM CAGE

PROCEDURE IS: _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ SEX M YR _____ MO _____ AGE _____ WEIGHT 1.0 KG

CLINICAL SIGNS/PROBLEMS: <input type="checkbox"/> DIARRHEA HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____ <input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER _____
---	--

PROCEDURE REQUESTED:
 DIRECT EXAMINATION
 CONCENTRATION
 SEDIMENTATION FORMALIN-ETHYLACETATE
 FLOTATION ZINC SULFATE

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>liquid</u>	COLOR: <u>cream</u>
EXAMINATION	<input type="checkbox"/> RBC: _____ <input type="checkbox"/> WBC: _____ <input type="checkbox"/> OTHER: _____	

Balantidium coli	Entamoeba histolytica
Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	Trichuris trichiura
Entamoeba hartmanni	<input checked="" type="checkbox"/> No Parasites Seen
Cryptosporidium IFA	Acid fast bacilli
Giardia IFA	Budding yeast

REPORTED BY: _____

REPORT DATE: 5/12/99

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

95

I.D. 8724 PROJECT CODE CRB01

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. MCY 28104

INVESTIGATOR _____ REQUESTOR _____

MICROBIOLOGY

DATE OF SAMPLE 5.12.99

ANIMAL DATA: HOME 100 ROOM - CAGE 00

SEX M AGE 8 YR MO 5 WEIGHT 5.6 KG

PROCEDURE IS: _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

PRIOR THERAPY NO YES
LIST ALL AGENTS:

HOSPITALIZED NO YES
ROOM _____ CAGE _____

SOURCE OF SPECIMEN(S)
Kidney

CULTURES REQUESTED	NEGATIVE RESULT	
	NEGATIVE	NO GROWTH
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS		<input checked="" type="checkbox"/>
<input type="checkbox"/> CAMPYLOBACTER	<input checked="" type="checkbox"/>	
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)		
<input type="checkbox"/> AEROBIC		
<input type="checkbox"/> ANAEROBIC		
<input type="checkbox"/> FUNGI		
<input type="checkbox"/> OTHER, _____		

DIRECT MICROSCOPIC EXAMINATION

ORGANISMS IDENTIFIED

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	AZITHROMYCIN (AZM15)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:

REPORTED BY: _____

REPORT DATE: 5.17.99

CLINICAL MICROBIOLOGY

2479

I.D. CRB01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. MCY 2804

INVESTIGATOR _____ REQUESTOR _____

MICROBIOLOGY

DATE OF SAMPLE 11/23/98

ANIMAL DATA: HOME ROOM 1606 CAGE 5

SEX M AGE 8 YR 3 MO WEIGHT 5.84 KG

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA	PRIOR THERAPY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	SOURCE OF SPECIMEN(S) <u>r/c</u>

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> CAMPYLOBACTER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AK 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 11.30.98

CLINICAL MICROBIOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Gold/enrod - Clinical Pathologist

920

I.D. CRB01
PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

M04 28104
ANIMAL I.D.

INVESTIGATOR _____ REQUESTOR _____

11/23/98
DATE OF SAMPLE

ANIMAL DATA: 1606 - 5
ROOM CAGE

M 8 YR 3 MO 5.84 KG
SEX AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT SEX EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA		PRIOR THERAPY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:	
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE		SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____	
PROCEDURE REQUESTED:			
<input checked="" type="checkbox"/> DIRECT EXAMINATION		<input type="checkbox"/> SKIN SCRAPING EXAM	
<input type="checkbox"/> CONCENTRATION SEDIMENTATION FORMALIN-ETHYLACETATE <input type="checkbox"/>		<input type="checkbox"/> STAIN FOR ACID FAST BACILLI	
FLOTATION ZINC SULFATE <input type="checkbox"/>		<input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA	
		<input type="checkbox"/> OTHER _____	

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>liquid</u>	COLOR: <u>clear</u>
EXAMINATION	<input type="checkbox"/> RBC: _____	<input type="checkbox"/> WBC: <u>1+</u> <input type="checkbox"/> OTHER: _____

Balantidium coli	<u>2+</u>	Entamoeba histolytica
<u>1+</u> Blastocystis hominis		Giardia lamblia
Chilomastix mesnili		Hexamita pitheci
Endolimax nana		Iodamoeba butschlii
Entamoeba NOS	<u>2+</u>	Trichomonas, NOS
<u>1+</u> Entamoeba coli		Trichuris trichiura
Entamoeba hartmanni		No Parasites Seen
Cryptosporidium IFA		Acid fast bacilli
Giardia IFA		Budding yeast

REPORTED BY: _____ REPORT DATE: 11/23/98

CLINICAL PARASITOLOGY

8724 CRB01
I.D. PROJECT CODE

CALIFORNIA PRIMATE
RESEARCH CENTER
MICROBIOLOGY

MCY 28104
ANIMAL I.D. 644
4/7/98
DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1606 - 5
HOME ROOM CAGE

M SEX 7 YR 8 MO AGE 5.38 KG WEIGHT

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

PRIOR THERAPY NO YES
LIST ALL AGENTS:

HOSPITALIZED NO YES
ROOM _____ CAGE _____

SOURCE OF SPECIMEN(S) r/c

CULTURES REQUESTED	NEGATIVE RESULT	
	NEGATIVE	NO GROWTH
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> CAMPYLOBACTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> AEROBIC	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ANAEROBIC	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> FUNGI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OTHER, _____	<input type="checkbox"/>	<input type="checkbox"/>

DIRECT MICROSCOPIC EXAMINATION

after 4 weeks cold enrichment
5/7/98

ORGANISMS IDENTIFIED

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 5/7/98

CLINICAL MICROBIOLOGY

I.D. 8724 PROJECT CODE CRB01

CALIFORNIA PRIMATE
RESEARCH CENTER
PARASITOLOGY

MCM
~~DATA~~ 28104 202
ANIMAL I.D.
4/7/98
DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1606 - 5
ROOM CAGE

M SEX 7 YR 8 MO 5.38 KG WEIGHT
AGE

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ SEX EXPERIMENTAL _____

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE	PRIOR THERAPY <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____
PROCEDURE REQUESTED <input checked="" type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> CONCENTRATION SEDIMENTATION <input type="checkbox"/> FORMALIN-ETHYLACETATE FLOTATION <input type="checkbox"/> ZINC SULFATE	<input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input checked="" type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER _____

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>liquid</u>	COLOR: <u>brown</u>
EXAMINATION	<input type="checkbox"/> RBC: _____ <input type="checkbox"/> WBC: <u>2+</u>	<input type="checkbox"/> OTHER: _____

	Balantidium coli	<u>1+</u>	Entamoeba histolytica
<u>1+</u>	Blastocystis hominis		Giardia lamblia
	Chilomastix mesnili		Hexamita pitheci
	Endolimax nana		Iodamoeba butschlii
	Entamoeba NOS	<u>1+</u>	Trichomonas, NOS
<u>1+</u>	Entamoeba coli		Trichuris trichiura
	Entamoeba hartmanni		No Parasites Seen
<u>—</u>	Cryptosporidium IFA		Acid fast bacilli
<u>—</u>	Giardia IFA		Budding yeast

REPORTED BY: _____ REPORT DATE: 4/7/98
4-8-98

CLINICAL PARASITOLOGY

18721 CRB01
 I.D. PROJECT CODE

CALIFORNIA PRIMATE
 RESEARCH CENTER
 MICROBIOLOGY

MCY 28104 644
 ANIMAL I.D.
 4/7/98
 DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____
 ANIMAL DATA: 1106 - 5
 HOME ROOM CAGE

M SEX
 7 YR 8 MO AGE
 5.38 KG WEIGHT

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA
 HOSPITALIZED NO YES
 ROOM _____ CAGE _____
 PRIOR THERAPY NO YES
 LIST ALL AGENTS:
 SOURCE OF SPECIMEN(S) *R/K*

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	✓		<i>4 weeks old enrichment w/50%</i>
<input checked="" type="checkbox"/> CAMPYLOBACTER	✓		
<input checked="" type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)	✓	<i>after</i>	
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
 REPORTED BY: _____

REPORT DATE: *5/7/98*

CLINICAL MICROBIOLOGY

361

I.D. CRB01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. MCY 28104

IN _____ REQUESTOR

MICROBIOLOGY

DATE OF SAMPLE 2-26-98

ANIMAL DATA: SW 1606 - 5
HOME ROOM CAGE

SEX M AGE 7 YR 6 MO WEIGHT 5.430 KG

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

HOSPITALIZED NO YES

PRIOR THERAPY NO YES
LIST ALL AGENTS:

SOURCE OF SPECIMEN(S)
R/C

CULTURES REQUESTED	NEGATIVE RESULT	
	NEGATIVE	NO GROWTH
<input checked="" type="checkbox"/> SALMONELLA SHIGELLA, YERSINIA, AEROMONAS	✓	
<input checked="" type="checkbox"/> CAMPYLOBACTER	✓	
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)		
<input type="checkbox"/> AEROBIC		
<input type="checkbox"/> ANAEROBIC		
<input type="checkbox"/> FUNGI		
<input type="checkbox"/> OTHER, _____		

DIRECT MICROSCOPIC EXAMINATION

ORGANISMS IDENTIFIED

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 3-2-98

CLINICAL MICROBIOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinical Pathologist

I.D. CRB01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

MEY 28104 ANIMAL I.D.

361

MICROBIOLOGY

2-26-98 DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: SW 1606 - 5
HOME ROOM CAGE

M 7 YR 6 MO 5.430 KG
SEX AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

PRIOR THERAPY NO YES
LIST ALL AGENTS:

HOSPITALIZED NO YES
ROOM _____ CAGE _____

SOURCE OF SPECIMEN(S)
P/C

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	✓		
<input checked="" type="checkbox"/> CAMPYLOBACTER	✓		
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 3-2-98

CLINICAL MICROBIOLOGY

119

MCY 28104
ANIMAL I.D.

2-26-98
DATE OF SAMPLE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

I.D. CRB01 PROJECT CODE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1006 - 5
ROOM CAGE

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ SEX M EXPERIMENTAL AGE 7 YR 6 MO WEIGHT 5.430 KG

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: _____ SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____ <input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER _____
---	--

PROCEDURE REQUESTED:
 DIRECT EXAMINATION
 CONCENTRATION
 SEDIMENTATION FORMALIN-ETHYLACETATE
 FLOTATION ZINC SULFATE

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>Soft</u>	COLOR: <u>Brown</u>
EXAMINATION	<input type="checkbox"/> RBC: _____	<input type="checkbox"/> WBC: _____
	<input type="checkbox"/> OTHER: _____	

<input type="checkbox"/> Balantidium coli	<input type="checkbox"/> Entamoeba histolytica
<input checked="" type="checkbox"/> Blastocystis hominis	<input type="checkbox"/> Giardia lamblia
<input type="checkbox"/> Chilomastix mesnili	<input type="checkbox"/> Hexamita pitheci
<input type="checkbox"/> Endolimax nana	<input type="checkbox"/> Iodamoeba butschlii
<input type="checkbox"/> Entamoeba NOS	<input type="checkbox"/> Trichomonas, NOS
<input type="checkbox"/> Entamoeba coli	<input type="checkbox"/> Trichuris trichiura
<input type="checkbox"/> Entamoeba hartmanni	<input type="checkbox"/> No Parasites Seen
<input type="checkbox"/> Cryptosporidium IFA	<input type="checkbox"/> Acid fast bacilli
<input type="checkbox"/> Giardia IFA	<input type="checkbox"/> Budding yeast

REPORTED BY: _____

REPORT DATE: 2/26/98

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinic Pathologist

2352

I.D. C2901 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

mcj 28109 ANIMAL I.D.

INVESTIGATOR _____ REQUESTOR _____

MICROBIOLOGY

11-26-97 DATE OF SAMPLE

ANIMAL DATA: 1605-5
HOME ROOM CAGE

M SEX 7 YR 4 MO AGE 5.83 KG WEIGHT

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

HOSPITALIZED NO YES

PRIOR THERAPY NO YES
LIST ALL AGENTS:

SOURCE OF SPECIMEN(S) CC

CULTURES REQUESTED	NEGATIVE RESULT	
	NEGATIVE	NO GROWTH
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> CAMPYLOBACTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> AEROBIC	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> ANAEROBIC	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> FUNGI	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> OTHER, _____	<input type="checkbox"/>	<input type="checkbox"/>

DIRECT MICROSCOPIC EXAMINATION

ORGANISMS IDENTIFIED

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AUC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS: _____
REPORTED BY: _____

REPORT DATE: 11-28-97

CLINICAL MICROBIOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldendrod - Clinical Pathologist

119

MCY 28104
ANIMAL I.D.

2-26-98
DATE OF SAMPLE

CRB01
PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1606 - 5
ROOM CAGE

M 7 YR 6 MO 5.430 KG
SEX AGE WEIGHT

PROCEDURE IS DIAGNOSTIC AID _____ COLONY MANAGEMENT _____

SEX EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS <input checked="" type="checkbox"/> DIARRHEA	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE	SOURCE OF SPECIMEN <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER

PROCEDURE REQUESTED

- DIRECT EXAMINATION
- CONCENTRATION
- SEDIMENTATION FORMALIN-ETHYLACETATE
- FLOTATION ZINC SULFATE
- SKIN SCRAPING EXAM
- STAIN FOR ACID FAST BACILLI
- CRYPTOSPORIDIA / GIARDIA IFA
- OTHER _____

FOR LABORATORY USE ONLY

APPEARANCE EXAMINATION	CONSISTENCY: <i>soft formed</i>	COLOR: <i>brown</i>
<input type="checkbox"/> RBC	<input type="checkbox"/> WBC	<input type="checkbox"/> OTHER

Balantidium coli	Entamoeba histolytica
<input checked="" type="checkbox"/> Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	Trichuris trichiura
Entamoeba hartmanni	No Parasites Seen
Cryptosporidium IFA	Acid fast bacilli
Giardia IFA	Budding yeast

REPORTED BY: _____

REPORT DATE: *2/26/98*

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinic Pathologist

1060

I.D. CRB01
PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

mcj 28104
ANIMAL I.D.

11-26-97
DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1606 - 5
ROOM _____ CAGE _____

m SEX AGE 7 YR 4 MO 5 83 KG WEIGHT

PROCEDURE IS DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL _____

CLINICAL SIGNS/PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA		PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:	
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM _____ CAGE _____		SOURCE OF SPECIMEN <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input checked="" type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____	
PROCEDURE REQUESTED <input checked="" type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> CONCENTRATION <input type="checkbox"/> STAIN FOR ACID FAST BACILLI SEDIMENTATION FORMALIN-ETHYLACETATE <input type="checkbox"/> <input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> FLOTATION ZINC SULFATE <input type="checkbox"/> OTHER _____			

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>soft firm</u>	COLOR: <u>light brown</u>
EXAMINATION	<input checked="" type="checkbox"/> RBC <u>+</u> <input type="checkbox"/> WBC <u>-</u> <input type="checkbox"/> OTHER _____	

Balantidium coli	Entamoeba histolytica
Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	Trichuris trichiura
Entamoeba hartmanni	No Parasites Seen
Cryptosporidium IFA	Acid fast bacilli
Giardia IFA	<u>+</u> Budding yeast

REPORTED BY: _____

REPORT DATE: 11-26-97

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinic Pathologist

867

I.D. CRP01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

MC4 28104 ANIMAL I.D.

INVESTIGATOR _____ REQUESTOR _____

9/18/97 DATE OF SAMPLE

ANIMAL DATA: 1606 - 5
ROOM CAGE

M 7 YR 1 MO 5.62 KG
SEX AGE WEIGHT

PROCEDURE IS DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS <input checked="" type="checkbox"/> DIARRHEA HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> _____ ROOM CAGE	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS SOURCE OF SPECIMEN <input checked="" type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER _____
PROCEDURE REQUESTED: <input checked="" type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> CONCENTRATION SEDIMENTATION <input type="checkbox"/> FORMALIN-ETHYLACETATE FLOTATION <input type="checkbox"/> ZINC SULFATE	<input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input checked="" type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER _____

FOR LABORATORY USE ONLY

APPEARANCE	CONSISTENCY: <u>Liquid</u>	COLOR: <u>Brown</u>
EXAMINATION	<input type="checkbox"/> RBC: _____	<input type="checkbox"/> WBC: _____
	<input type="checkbox"/> OTHER: _____	

	Balantidium coli	Entamoeba histolytica
<u>H</u>	Blastocystis hominis	Giardia lamblia
	Chilomastix mesnili	Hexamita pitheci
	Endolimax nana	Iodamoeba butschlii
	Entamoeba NOS	Trichomonas, NOS
	Entamoeba coli	Trichuris trichiura
	Entamoeba hartmanni	No Parasites Seen
<u>--</u>	Cryptosporidium IFA	Acid fast bacilli
<u>--</u>	Giardia IFA	Budding yeast

REPORTED BY: _____

REPORT DATE: 9/18/97
9/26/97

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinic Pathologist

1993

I.D. CR201 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. MCY 28104

INVESTIGATOR _____ REQUESTOR _____

MICROBIOLOGY

DATE OF SAMPLE 9/18/97

ANIMAL DATA: HOME 1606 ROOM - CAGE 5

SEX M AGE 7 YR 1 MO 5.62 KG WEIGHT

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: <input checked="" type="checkbox"/> DIARRHEA	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	SOURCE OF SPECIMEN(S) <u>P/c</u>

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/> CAMPYLOBACTER	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 9-22-97

CLINICAL MICROBIOLOGY

1995

I.D. CRPO1 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

ANIMAL I.D. MCY 38104

INVESTIGATOR _____ REQUESTOR _____

MICROBIOLOGY

DATE OF SAMPLE 9/18/97

ANIMAL DATA: 11:6 - 5
HOME ROOM CAGE

M 7 YR 1 MO 5.62 KG
SEX AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA

PRIOR THERAPY NO YES
LIST ALL AGENTS:

HOSPITALIZED NO YES

SOURCE OF SPECIMEN(S)
1/1

ROOM _____ CAGE _____

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	✓		
<input checked="" type="checkbox"/> CAMPYLOBACTER	✓		
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:

REPORTED BY: _____

REPORT DATE: 9-22-97

CLINICAL MICROBIOLOGY

White - Animals Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinical Pathologist

867

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

I.D. PROJECT CODE

ANIMAL I.D.

INVESTIGATOR REQUESTOR

DATE OF SAMPLE

ANIMAL DATA: ROOM CAGE

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT SEX EXPERIMENTAL YR MO AGE WEIGHT

CLINICAL SIGNS/PROBLEMS: <input type="checkbox"/> DIARRHEA HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/> ROOM CAGE	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS: SOURCE OF SPECIMEN: <input type="checkbox"/> FECES, Fresh catch <input type="checkbox"/> Composite <input type="checkbox"/> FECES, Cage sample <input type="checkbox"/> OTHER
PROCEDURE REQUESTED: <input type="checkbox"/> DIRECT EXAMINATION <input type="checkbox"/> CONCENTRATION SEDIMENTATION <input type="checkbox"/> FORMALIN-ETHYLACETATE FLOTATION <input type="checkbox"/> ZINC SULFATE	<input type="checkbox"/> SKIN SCRAPING EXAM <input type="checkbox"/> STAIN FOR ACID FAST BACILLI <input type="checkbox"/> CRYPTOSPORIDIA / GIARDIA IFA <input type="checkbox"/> OTHER

FOR LABORATORY USE ONLY

APPEARANCE EXAMINATION	CONSISTENCY: <input type="checkbox"/> RBC: <input type="checkbox"/> WBC: <input type="checkbox"/> OTHER:	COLOR:
------------------------	---	--------

Balantidium coli	Entamoeba histolytica
H Blastocystis hominis	Giardia lamblia
Chilomastix mesnili	Hexamita pitheci
Endolimax nana	Iodamoeba butschlii
Entamoeba NOS	Trichomonas, NOS
Entamoeba coli	Trichuris trichiura
Entamoeba hartmanni	No Parasites Seen
Cryptosporidium IFA	Acid fast bacilli
Giardia IFA	Budding yeast

REPORTED BY:

REPORT DATE: 9/15/97

CLINICAL PARASITOLOGY

White - Animal's Chart

Yellow - Laboratory

Pink - Requestor

Goldenrod - Clinic Pathologist

4378

VIRAL PRECAUTION

CALIFORNIA PRIMATE RESEARCH CENTER

I.D. CRB01 PROJECT CODE

UCY 28104 ANIMAL I.D.

HEMATOLOGY

INVESTIGATOR _____ REQUESTOR _____

7/28/97 DATE OF SAMPLE

ANIMAL DATA: 1606 - 5
HOME ROOM CAGE

M SEX 6 YR 11 MO 5.3 KG WEIGHT

PROEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	ROOM _____ CAGE _____

BLEEDING CONDITIONS Squeezed - limb pulled Caught on run Fasted _____ hrs Anesthetized Other _____

COMPLETE BLOOD COUNT ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN

<input type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION. TOTAL WBC <u>17.3</u> X 10 ³ /µl			PLATELETS		
<input type="checkbox"/> CORRECTED WBC _____ X 10 ³ /µl			DIFFERENTIAL			<input type="checkbox"/> ADEQUATE <input type="checkbox"/> DECREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input checked="" type="checkbox"/> INCREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input checked="" type="checkbox"/> +3 <input checked="" type="checkbox"/> LARGE PLATELETS <input checked="" type="checkbox"/> CLUMPED		
WBC	<u>17.3</u>	X 10 ³ / µl		%	/µl			
RBC	<u>5.53</u>	X 10 ⁶ / µl	METAMYELOCYTES					
HEMOGLOBIN	<u>11.6</u>	gm/dl	BAND NEUTROPHILS					
HEMATOCRIT	<u>39.3</u>	%	SEG NEUTROPHILS	<u>79</u>	<u>13667</u>	ERYTHROCYTE MORPHOLOGY		
MCV	<u>71</u>	fl	LYMPHCYTES	<u>15</u>	<u>2595</u>	<input checked="" type="checkbox"/> ESSENTIALLY NORMAL		
MCH	<u>21.0</u>	pg	MONOCYTES	<u>6</u>	<u>1038</u>	<input type="checkbox"/> HYPOCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
MCHC	<u>29.5</u>	pg/fl	EOSINOPHILS			<input type="checkbox"/> POLYCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
PLATELETS	<u>343</u>	X 10 ⁵ / µl	BASOPHILS			<input type="checkbox"/> LEPTOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> RETICULOCYTES	%	X 10 ⁵ / µl	OTHER			<input type="checkbox"/> POIKILOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC			<input checked="" type="checkbox"/> ANISOCYTOSIS <input type="checkbox"/> +1 <input checked="" type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input checked="" type="checkbox"/> PLASMA PROTEIN	<u>7.6</u>	gm/dl	COMMENTS	<input type="checkbox"/> PARTIALLY CLOTTED SAMPLE	<input type="checkbox"/> PREDILUTE	<input type="checkbox"/> ROULEAUX <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
PLASMA COLOR:								
<input type="checkbox"/> NO ABNORMALITIES								
<input checked="" type="checkbox"/> HEMOLYZED <u>SL</u>								
<input type="checkbox"/> ICTERIC								
<input type="checkbox"/> LIPEMIC								
<input checked="" type="checkbox"/> FIBRINOGEN	<u>100</u>	mg/dl						

REPORTED BY: _____

REPORT DATE: 7-28-97

I.D. CRB01
PROJECT CODE

**CALIFORNIA PRIMATE
RESEARCH CENTER**

1686
UCY 28104
ANIMAL I.D.

INVESTIGATOR _____ REQUESTOR _____

**CLINICAL
BIOCHEMISTRY**

7/28/77
DATE OF SAMPLE

ANIMAL DATA: 1606 - 5
HOME ROOM CAGE
PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL
SEX: M AGE: 6 YR 11 MO WEIGHT: 5.3 KG

CLINICAL SIGNS/PROBLEMS:	PRIOR THERAPY ? NO <input type="checkbox"/> YES <input type="checkbox"/> LIST ALL AGENTS
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	TIME DRAWN _____ AM PM TEMP _____ °C

DIETARY STATUS: UNKNOWN FED FASTED HOURS _____ COMMENTS 40 VMTH 7-28-77

SAMPLE: SERUM HEPARINIZED PLASMA CITRATED BLOOD HEPARINIZED BLOOD URINE SAMPLE COLOR: NO ABNORMALITIES HEMOLYZED

PANEL: NOVA PP2 PP3 SPECIAL PANELS CLINICAL SERUM BANK ICTERIC LIPEMIC
ART VEN (ARRANGE WITH LAB) BOX _____ SLOT _____

#	TEST	RESULT	UNITS	#	TEST	RESULT	UNITS	#	TEST	TIME	TIME	TIME	TIME	UNITS
1	SODIUM (S,HP)	144	mM/L	14	YG(TS,HP)	45	U/L	25	NOVA					
2	POTASSIUM (S,HP)	3.3	mM/L	15	CPK (S,HP)		U/L		pH					pH unit
3	CHLORIDE (S,HP)	108	mM/L	16	AST (SGOT) (S,HP)		U/L		CO ₂ -pCO ₂					mm Hg
4	TCO ₂ (S,HP)	28	mM/L	17	BI(L) TOTAL(S,HP)	0.6	mg/dl		pO ₂					mm Hg
	ANION GAP 3+4-(1+2)	11	mM/L	18	DIRECT	0.1	mg/dl		HCT					%
5	CALCIUM (S,HP)	8.3	mg/dl	19	INDIRECT		mg/dl		SODIUM					mM/L
6	PHOSPHOROUS (S)	6.4	mg/dl	20	LDH (S,HP)		U/L		POTASSIUM					mEq/L
7	CREATININE (S,HP)	1.4	mg/dl	21	CHOLESTEROL (S,HP)		mg/dl		CHLORIDE					mM/L
8	BUN (S,HP)	41	mg/dl	22	TRIGLYCERIDES		mg/dl		CALCIUM					mM/L
9	GLUCOSE (S,P,HP)	76	mg/dl	23	OTHER (SPECIFY)				GLUCOSE					mg/dl
10	ALT(SGPT) (S,HP)	54	U/L	24	CLOTTING PANEL	PATIENT CONTROL			HGB					g/dl
11	ALK P(TASE) (S,HP)	257	U/L		PROTHROMBIN TIME		SEC		BE-ECF					mM/L
12	TOTAL PROTEIN (S)	7.9	gm/dl		PTT		SEC		BASE BALANCE					mM/L
13	ALBUMIN	3.7	gm/dl		FDP		ug/ml		BICARB					mM/L

* CALL BEFORE DRAWING SAMPLE
REPORTED BY _____ DATE 8/5/97
PERFORMED BY: CPRC VMTH OTHER

TCO ₂				mM/L
O ₂ SAT				%
ANION GAP				
OSMO				mOsm/kg

CLINICAL BIOCHEMISTRY

I.D. 1 CPB01 PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

MACY - 28104 ANIMAL I.D.

INVESTIGATOR _____ REQUESTER _____

DENTISTRY
NEW WORLD PRIMATES

12-19-93 DATE OF SAMPLE

ANIMAL DATA: 1606 - 4
HOMEROOM CAGE

M SEX 7 YR 1 MO 1.5 KG AGE WEIGHT

PROCEDURE IS: _____ DIAGNOSTIC AID COLONY MANAGEMENT _____ EXPERIMENTAL _____

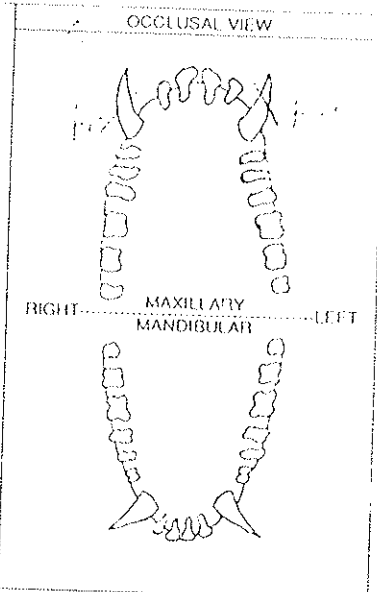
CLINICAL SIGNS/PROBLEMS:
Long h²

PRIOR HISTORY:

RADIOGRAPHS YES NO

DESCRIPTIONS OF PROCEDURES PERFORMED

Performed pulp therapy on a mandibular premolar using Formocresol in order to be general to repair pulp vitality. Teeth were filled using composite.
Lower canine was bleached



Code Key			
C	calculus	KC	K-9 cut
CF	composite filling	RC	root canal
FX	fractured tooth	RD	retained
G	gingivitis		Goodrous
L	loose tooth	X	extracted tooth
O	missing tooth	S	scaling

PROCEDURES PERFORMED BY:
Anesthesia, Concurrent Medication

Substance	Dose	Amount	Frequency	Route
1 <u>Telazol</u>		<u>0.3</u>	<u>SID</u>	<u>IM</u>
2 <u>Atropine</u>		<u>0.5</u>	<u>SID</u>	<u>IM</u>
3 <u>PPG</u>		<u>0.6</u>	<u>SID</u>	<u>SC</u>
4				

POSTOPERATIVE CARE

TIME IN: 3:15
TIME OUT: 3:50

DENTISTRY

6036

CALIFORNIA PRIMATE RESEARCH CENTER

I.D. 1606 PROJECT CODE CRB01

ANIMAL I.D. May 28104

HEMATOLOGY

DATE OF SAMPLE 11-14-95

INVESTIGATOR _____ REQUESTOR _____



ANIMAL DATA: 1606 - 5
HOME ROOM CAGE

SEX M AGE 5 YR 3 MO WEIGHT 4.3 KG

PROCEDURE IS DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS			PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS.		
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>			ROOM _____ CAGE _____		
BLEEDING CONDITIONS <input checked="" type="checkbox"/> Sedated - limb pulled <input type="checkbox"/> Caught on run <input type="checkbox"/> Fasted _____ hrs <input type="checkbox"/> Anesthetized <input type="checkbox"/> Other _____					
<input type="checkbox"/> COMPLETE BLOOD COUNT ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN					
<input checked="" type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC _____ X 10 ³ /μl <input type="checkbox"/> CORRECTED WBC _____ X 10 ³ /μl		
WBC	<u>12.6</u>	X 10 ³ / μl	DIFFERENTIAL	%	/ μl
RBC	<u>6.01</u>	X 10 ⁶ / μl	METAMYELOCYTES		
HEMOGLOBIN	<u>12.0</u>	gm/dl	BAND NEUTROPHILS		
HEMATOCRIT	<u>40.3</u>	%	SEG. NEUTROPHILS		
MCV	<u>67</u>	fl	LYMPHOCYTES		
MCH	<u>20.0</u>	pg	MONOCYTES		
MCHC	<u>29.8</u>	pg/fl	EOSINOPHILS		
PLATELETS	<u>4.06</u>	X 10 ⁵ / μl	BASOPHILS		
<input type="checkbox"/> RETICULOCYTES	%	_____ X 10 ⁵ / μl	OTHER		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC		
<input type="checkbox"/> PLASMA PROTEIN	gm/dl		COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE		
PLASMA COLOR: <input type="checkbox"/> NO ABNORMALITIES <input type="checkbox"/> HEMOLYZED <input type="checkbox"/> ICTERIC <input type="checkbox"/> LIPEMIC					
<input type="checkbox"/> FIBRINOGEN	mg/dl				

PLATELETS

ADEQUATE

DECREASED +1 +2 +3

INCREASED +1 +2 +3

LARGE PLATELETS

CLUMPED

ERYTHROCYTE MORPHOLOGY

ESSENTIALLY NORMAL

HYPOCHROMASIA +1 +2 +3 +4

POLYCHROMASIA +1 +2 +3 +4

LEPTOCYTOSIS +1 +2 +3 +4

POIKILOCYTOSIS +1 +2 +3 +4

ANISOCYTOSIS +1 +2 +3 +4

POIXEUX +1 +2 +3 +4

REPORTED BY: _____

REPORT DATE: 11/14/95

8713 CR801
I.D. PROJECT CODE

CALIFORNIA PRIMATE
RESEARCH CENTER

2881
mmu 28104
ANIMAL I.D.

MICROBIOLOGY

12/27/94
DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____

ANIMAL DATA: 1606 - 5
HOME ROOM CAGE

M 4 YR 4 MO 2.8 KG
SEX AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS:
 DIARRHEA
epistaxis / Poor appetite
HOSPITALIZED NO YES
ROOM _____ CAGE _____

PRIOR THERAPY NO YES
LIST ALL AGENTS:
SOURCE OF SPECIMEN(S)
Nasal Swab

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS			Mod. columnar epith cells, PMNs + mucus. mod moraxella-like gram negative rods (encapsulated). many Staph-like gram positive cocci
<input type="checkbox"/> CAMPYLOBACTER			
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input checked="" type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER, _____			

ORGANISMS IDENTIFIED

1. *St. coagulase positive Staphylococcus sp.*
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AN 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VANCOMYCIN (VA 30)

COMMENTS:

REPORTED BY: _____

REPORT DATE: 12/27/94

CLINICAL MICROBIOLOGY

6854

CALIFORNIA PRIMATE RESEARCH CENTER

8713, CRB01
I.D. PROJECT CODE

mmu 29104
ANIMAL I.D.

HEMATOLOGY

12/22/94
DATE OF SAMPLE

INVESTIGATOR REQUESTOR



ANIMAL DATA: 1606 - 5
HOME ROOM CAGE

M 4 YR 4 MO 2.8 KG
SEX AGE WEIGHT

PROCEDURE IS: DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: Epistaxis / poor appetite

PRIOR THERAPY NO YES
LIST ALL AGENTS:

HOSPITALIZED NO YES

BLEEDING CONDITIONS: Squeezed limb pulled Caught on run Fasted _____ hrs Anesthetized Other _____

COMPLETE BLOOD COUNT: ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN

<input type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC <u>1.2</u> X 10 ³ /μl			PLATELETS		
<input type="checkbox"/> CORRECTED WBC _____ X 10 ³ /μl						<input checked="" type="checkbox"/> ADEQUATE		
WBC	11.2	X 10 ³ / μl	DIFFERENTIAL	%	/ μl	<input type="checkbox"/> DECREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3		
RBC	4.60	X 10 ⁶ / μl	METAMYELOCYTES			<input type="checkbox"/> INCREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3		
HEMOGLOBIN	9.4	gm/dl	BAND NEUTROPHILS			<input type="checkbox"/> LARGE PLATELETS		
HEMATOCRIT	30.0	%	SEG. NEUTROPHIL*	73	8176	<input type="checkbox"/> CLUMPED	ERYTHROCYTE MORPHOLOGY	
MCV	65	fl	LYMPHOCYTES	2.3	2576	<input checked="" type="checkbox"/> ESSENTIALLY NORMAL		
MCH	20.4	pg	MONOCYTES	4	448	<input type="checkbox"/> HYPOCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
MCHC	31.3	pg/fl	EOSINOPHILS			<input type="checkbox"/> POLYCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
PLATELETS	2.79	X 10 ⁵ / μl	BASOPHILS			<input type="checkbox"/> LEPTOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> RETICULOCYTES	%	X 10 ⁵ / μl	OTHER			<input type="checkbox"/> POIKILOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC			<input type="checkbox"/> ANISOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> PLASMA PROTEIN	7.7	gm/dl	COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE					
PLASMA COLOR:			* slight toxic granulation					
<input checked="" type="checkbox"/> NO ABNORMALITIES								
<input type="checkbox"/> HEMOLYZED								
<input type="checkbox"/> ICTERIC								
<input type="checkbox"/> LIPEMIC								
<input type="checkbox"/> FIBRINOGEN	500	mg/dl						

REPORTED BY: _____

REPORT DATE: 12/22/94

3344

8713, CR1301
I.D. PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

mmu - 28104
ANIMAL I.D.

INVESTIGATOR REQUESTOR

CLINICAL BIOCHEMISTRY

12/22/94
DATE OF SAMPLE

ANIMAL DATA: 1606-5
HOMEROOM CAGE

M 4 YR 4 MO 2.9 KG
SEX AGE WEIGHT

PROCEDURE IS: X DIAGNOSTIC AID COLONY MANAGEMENT EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: Epistaxis / Poor Appetite

PRIOR THERAPY? NO YES
LIST ALL AGENTS

HOSPITALIZED NO YES ROOM CAGE

TIME DRAWN AM PM TEMP °C

DIETARY STATUS: UNKNOWN FED FASTED HOURS COMMENTS Serum Bank

SAMPLE: SERUM HEPARINIZED PLASMA CITRATED BLOOD HEPARINIZED BLOOD URINE SAMPLE COLOR: NO ABNORMALITIES HEMOLYZED 21

PANEL: NOVA PP2 PP3 SPECIAL PANELS CLINICAL SERUM BANK ICTERIC LIPEMIC
ART VEN (ARRANGE WITH LAB) BOX 387 SLOT 86

#	✓	TEST	RESULT	UNITS	#	✓	TEST	RESULT	UNITS	#	✓	TEST	TIME	TIME	TIME	TIME	UNITS
1		SODIUM (S,HP)		mM/L	14		YGT(S,HP)		U/L	25		NOVA					
2		POTASSIUM (S,HP)		mM/L	15		CPK (S,HP)		U/L			SODIUM					mM/L
3		CHLORIDE (S,HP)		mM/L	16		AST (SGOT) (S,HP)		U/L			POTASSIUM					mM/L
4		TCO ₂ (S,HP)		mM/L	17		BILI TOTAL (S,HP)		mg/dl			CHLORIDE					mM/L
		ANION GAP 3+4 (1+2)		mM/L	18		DIRECT		mg/dl			ANION GAP					
5		CALCIUM (S,HP)		mg/dl	19		INDIRECT		mg/dl			GLUCOSE					mg/dl
6		PHOSPHOROUS (S)		mg/dl	20		LDH (S,HP)		U/L			OSMO					mOsm/kg
7		CREATININE (S,HP)		mg/dl	21		CHOLESTEROL (S,HP)		mg/dl			HCT					%
8		BUN (S,HP)		mg/dl	22		TRIGLYCERIDES		mg/dl			HGB					g/dl
9		GLUCOSE (S,P,HP)		mg/dl	23		*OTHER (SPECIFY)					BE-ECF					mM/L
10		ALT (SGPT) (S,HP)		U/L	24		*CLOTTING PANEL	PATIENT CONTROL				TCO ₂					mM/L
11		ALK PTASE (S,HP)		U/L			PROTHROMBIN TIME		SEC			PH					pH unit
12		TOTAL PROTEIN (S)		gm/dl			PTT		SEC			CO ₂ pCO ₂					mm Hg
13		ALBUMIN		gm/dl			FDP		µg/ml			pO ₂					mm Hg

* CALL BEFORE DRAWING SAMPLE

REPORTED BY _____

DATE 12-22-94

PERFORMED BY: CPCR VMTH OTHER

BICARB		mM/L
BASE BALANCE		mM/L

CLINICAL BIOCHEMISTRY

**CALIFORNIA PRIMATE RESEARCH CENTER
PHYSICAL EXAM AND EVALUATION/HEALTH CERTIFICATE**

SPECIES/ID# MCY 28104 LOCATION 1606-5 OUT 24 DATE 4/11/94
 REASON FOR EXAM: ROUTINE PRE-SHIPMENT QU SCREEN EXPERIMENTAL
 OTHER IN

ORGAN SYSTEMS: NAO=NO ABNORMALITIES OBSERVED A=ABNORMAL NE=NOT EXAMINED							
1. INTEGUMENT	NAO	<u>A</u>	NE	6. SPLEEN/L. NODES	NAO	A	NE
2. ORAL CAVITY	NAO	A	NE	7. RESPIRATORY	NAO	A	NE
3. EYES	NAO	A	NE	8. DIGESTIVE	NAO	A	NE
4. MUSCULOSKELET.	NAO	A	NE	9. UROGENITAL	NAO	A	NE
5. CIRCULATORY	NAO	A	NE	10. OTHER	NAO	A	NE
FEMORAL VESSELS: Right <u>good</u> Left <u>good</u>							
WEIGHT (kg) <u>3.92</u> DATE <u>4/4/94</u> CURRENT TB TEST <u>4/4/94</u>							
ABNORMAL FINDINGS: <u>Abdomen tense, so abdominal palpation difficult. Fibrous scar tissue 1 cm² area of (L) dorsal thigh = probably scar tissue.</u>							
<u>Excellent body & coat condⁿ.</u>							

REPRODUCTIVE EVALUATION	
Palpation of testicles: NSF	UTERUS: NAO A NE ADHESIONS: MINOR MODERATE SEVERE PREGNANCY STATUS: PREGNANT: GL (mm)= _____ BPD (mm)= _____ FL (mm)= _____ E/FHR (bpm)= _____ Gest. Age (days) _____ GENDER: M F
	NONPREGNANT: UTERINE SIZE _____ CONTOUR/SHAPE _____

REPRODUCTIVELY SOUND AREPRODUCTIVE RE-EVALUATE NOT EVALUATED
 COMMENTS: Est age 44 mos.

OVERALL CONDITION: EXCELLENT GOOD FAIR POOR

RECOMMENDATION: I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THIS ANIMAL HAS BEEN EXAMINED AND IS :

<input type="checkbox"/> SATISFACTORY FOR SHIPMENT	COMMENT:
<input type="checkbox"/> SATISFACTORY FOR PROJECT	COMMENT:
<input checked="" type="checkbox"/> OTHER <u>screen-in</u>	COMMENT:

DATE: 4/11/94 EXAMINING VETERINARIAN:

**CALIFORNIA PRIMATE RESEARCH CENTER
PHYSICAL EXAM AND EVALUATION/HEALTH CERTIFICATE**

SPECIES/ID# MLY 28104 LOCATION SW1606-5 DATE 7/20/94
 REASON FOR EXAM: ROUTINE PRE-SHIPMENT QU SCREEN EXPERIMENTAL
 OTHER OUT

ORGAN SYSTEMS: NAO=NO ABNORMALITIES OBSERVED A=ABNORMAL NE=NOT EXAMINED					
1. INTEGUMENT	<u>NAO</u>	A	NE	6. SPLEEN/L. NODES	<u>NAO</u> A NE
2. ORAL CAVITY	<u>NAO</u>	A	NE <u>Fartor</u>	7. RESPIRATORY	<u>NAO</u> A NE
3. EYES	<u>NAO</u>	A	NE	8. DIGESTIVE	<u>NAO</u> A NE
4. MUSCULOSKELET.	<u>NAO</u>	A	NE	9. UROGENITAL	<u>NAO</u> A NE
5. CIRCULATORY	<u>NAO</u>	A	NE	10. OTHER	<u>NAO</u> A <u>NE</u>
FEMORAL VESSELS: Right <u>OK</u> Left <u>OK</u>					
WEIGHT (kg) <u>4.2</u> DATE <u>7/20/94</u> CURRENT TB TEST <u>6/13/94</u>					
ABNORMAL FINDINGS:					

REPRODUCTIVE EVALUATION	UTERUS: NAO A NE ADHESIONS: MINOR MODERATE SEVERE PREGNANCY STATUS: PREGNANT: GL (mm)= _____ BPD (mm)= _____ FL (mm)= _____ E/FHR (bpm)= _____ Gest. Age (days) _____ GENDER: M F	NONPREGNANT: UTERINE SIZE _____ CONTOUR/SHAPE _____
--------------------------------	--	---

REPRODUCTIVELY SOUND
 AREPRODUCTIVE
 RE-EVALUATE
 NOT EVALUATED
 COMMENTS:

OVERALL CONDITION:
 EXCELLENT
 GOOD
 FAIR
 POOR

RECOMMENDATION: I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THIS ANIMAL HAS BEEN EXAMINED AND IS :
 SATISFACTORY FOR SHIPMENT COMMENT:
 SATISFACTORY FOR PROJECT COMMENT:
 OTHER COMMENT:
 DATE: 7/20/94 EXAMINING VETERINARIAN: _____

2176

I.D. CPRC PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

MCY - 28104 ANIMAL I.D.

INVESTIGATOR _____ REQUESTOR _____

CLINICAL BIOCHEMISTRY

7/21/94 DATE OF SAMPLE

ANIMAL DATA: 1606 - 5
HOMEROOM CAGE

M SEX 3 YR 11 MO 4.2 KG WEIGHT

PROCEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: <u>Splintering</u>	PRIOR THERAPY? NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> LIST ALL AGENTS
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	TIME DRAWN _____ AM PM TEMP _____ C

DIETARY STATUS: UNKNOWN FED FASTED HOURS _____ COMMENTS to Umth 7-22-94

SAMPLE: SERUM HEPARINIZED PLASMA CITRATED BLOOD HEPARINIZED BLOOD URINE SAMPLE COLOR NO ABNORMALITIES
HEMOLYZED ICTERIC LIPEMIC

PANEL: NOVA PP2 PP3 SPECIAL PANELS CLINICAL SERUM BANK
ART VEN (ARRANGE WITH LAB) CHEM 20 BOX _____ SLOT _____

#	TEST	RESULT	UNITS	#	TEST	RESULT	UNITS	#	TEST	TIME	TIME	TIME	TIME	UNITS
1	SODIUM (S,HP)	147	mM	14	YGT(S,HP)	71	U/L	25	NOVA					
2	POTASSIUM (S,HP)	3.9	mM	15	CPK (S,HP)	1711	U/L		SODIUM					mM
3	CHLORIDE (S,HP)	112	mM	16	AST (SGOT) (S,HP)	66	U/L		POTASSIUM					mM
4	TCO ₂ (S,HP)	26	mM	17	BILI TOTAL (S,HP)	0.3	mg/dl		CHLORIDE					mM
	ANION GAP 3+4-(1+2)	13	mM	18	DIRECT		mg/dl		ANION GAP					
5	CALCIUM (S,HP)	9.8	mg/dl	19	INDIRECT		mg/dl		GLUCOSE					mg/dl
6	PHOSPHOROUS (S)	4.4	mg/dl	20	LDH (S,HP)	431	U/L		OSMO					mOsm/kg
7	CREATININE (S,HP)	2.4	mg/dl	21	CHOLESTEROL (S,HP)	106	mg/dl		HCT					%
8	BUN (S,HP)	24	mg/dl	22	TRIGLYCERIDES	14	mg/dl		HGB					g/dl
9	GLUCOSE (S,P,HP)	71	mg/dl	23	*OTHER (SPECIFY)				BE-ECF					mM
10	ALT[SGPT] (S,HP)	87	U/L	24	*CLOTTING PANEL	PATIENT CONTROL			TCO ₂					mM
11	ALK PTASE (S,HP)	618	U/L		PROTHROMBIN TIME		SEC		PH					pH unit
12	TOTAL PROTEIN (S)	6.1	gm/dl		PTT		SEC		CO ₂ pCO ₂					mmHg
13	ALBUMIN	4.2	gm/dl		FDP		µg/ml		pO ₂					mmHg

* CALL BEFORE DRAWING SAMPLE

REPORTED BY _____ DATE 7/25/94

PERFORMED BY: CPRC VMTH OTHER

① Transcription err. should read 1.1 mg/dl mJ.

CLINICAL BIOCHEMISTRY

8713 , CRB01
I.D. PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

MCY 28104
ANIMAL I.D.

RADIOLOGY

7/20/94
DATE OF EXAM

INVESTIGATOR _____ REQUESTOR _____



ANIMAL DATA: SW1606 -
HOMEROOM CAGE

M SEX 3 YR 11 MO AGE 4.3 KG WEIGHT

HOSPITAL ROOM _____ CAGE _____

PROCEDURE IS: _____ DIAGNOSTIC AID COLONY MANAGEMENT _____ EXPERIMENTAL

TENT. DIAGNOSIS:		EXAM REQUESTED	
HISTORY: <i>Quarantine X-ray cut</i>		Head <input type="checkbox"/> nasal cavity <input type="checkbox"/> teeth upper <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> lower <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> mandible R <input type="checkbox"/> L <input type="checkbox"/> maxilla R <input type="checkbox"/> L <input type="checkbox"/> skull - routine	
SPECIAL PROCEDURES:		Neck <input type="checkbox"/> cervical spine <input type="checkbox"/> soft tissues	
Previous radiographs: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Repeat studies required	Thorax <input checked="" type="checkbox"/> routine <input type="checkbox"/> thoracic vertebra <input type="checkbox"/> esophagus <input type="checkbox"/> thoracic inlet	
Investigator: _____	at _____ days/weeks/months	Abdomen <input type="checkbox"/> routine <input type="checkbox"/> obstruction series <input type="checkbox"/> liver <input type="checkbox"/> intestinal tract <input type="checkbox"/> kidney, ureter bladder <input type="checkbox"/> uterus <input type="checkbox"/> prostate <input type="checkbox"/> lumbar vertebra <input type="checkbox"/> sacral vertebra <input type="checkbox"/> coccygeal vertebra <input type="checkbox"/> I.U. <input type="checkbox"/> cystography <input type="checkbox"/> upper g.i. <input type="checkbox"/> lower g.i. <input type="checkbox"/> myelogram	
Technique: <input checked="" type="checkbox"/> Vertical <input type="checkbox"/> Table Top <input type="checkbox"/> Bucky	cm ma time kvp	Arm <input type="checkbox"/> shoulder <input type="checkbox"/> R <input type="checkbox"/> humerus <input type="checkbox"/> elbow joint <input type="checkbox"/> L <input type="checkbox"/> radius-ulna <input type="checkbox"/> carpal joints <input type="checkbox"/> hand	
Film Type: <i>Paripred</i>	Lat. <i>50 4/126</i>	Leg <input type="checkbox"/> pelvis <input type="checkbox"/> R <input type="checkbox"/> hip joint <input type="checkbox"/> femur <input type="checkbox"/> L <input type="checkbox"/> knee joint <input type="checkbox"/> tibia-fibula <input type="checkbox"/> tarsal joints <input type="checkbox"/> foot	
Total No. Films: <i>2</i>	VD <i>S C</i>	Ultrasound <input type="checkbox"/> Other: (Specify) _____	
RADIOGRAPHIC INTERPRETATION: <i>NRS</i>		CONCLUSIONS:	

REPORTED BY: _____

REPORT DATE: *7/20/94*

CLINICAL RADIOLOGY

4189

CALIFORNIA PRIMATE RESEARCH CENTER

I.D. CRB01
PROJECT CODE

MEY 28/104
ANIMAL I.D.

HEMATOLOGY

7/21/94
DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____



ANIMAL DATA: 1666 - 5
HOME ROOM CAGE

M 3 YR 11 MO 4.2 KG
SEX AGE WEIGHT

PROEDURE IS: DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS/PROBLEMS: <u>Splenomegaly</u>	PRIOR THERAPY <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>	ROOM _____ CAGE _____

BLEEDING CONDITIONS: Squeezed - limb pulled Caught on run Fasted _____ hrs Anesthetized Other _____

COMPLETE BLOOD COUNT: ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN

<input type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC <u>12.2</u> X 10 ³ /μl			PLATELETS		
<input type="checkbox"/> CORRECTED WBC _____ X 10 ³ /μl						<input checked="" type="checkbox"/> ADEQUATE		
WBC	<u>12.2</u>	X 10 ³ /μl	DIFFERENTIAL	%	/μl	<input type="checkbox"/> DECREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3		
RBC	<u>5.37</u>	X 10 ⁶ /μl	METAMYELOCYTES			<input type="checkbox"/> INCREASED <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3		
HEMOGLOBIN	<u>10.7</u>	gm/dl	BAND NEUTROPHILS			<input type="checkbox"/> LARGE PLATELETS		
HEMATOCRIT	<u>34.6</u>	%	SEG. NEUTROPHILS	<u>69</u>	<u>8418</u>	<input type="checkbox"/> CLUMPED		
MCV	<u>64</u>	fl	LYMPHOCYTES	<u>31</u>	<u>3782</u>	ERYTHROCYTE MORPHOLOGY		
MCH	<u>19.9</u>	pg	MONOCYTES			<input checked="" type="checkbox"/> ESSENTIALLY NORMAL		
MCHC	<u>30.9</u>	pg/fl	EOSINOPHILS			<input type="checkbox"/> HYPOCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
PLATELETS	<u>3.44</u>	X 10 ⁵ /μl	BASOPHILS			<input type="checkbox"/> POLYCHROMASIA <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> RETICULOCYTES	%	X 10 ⁵ /μl	OTHER			<input type="checkbox"/> LEPTOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC			<input type="checkbox"/> POIKILOCYTOSIS <input type="checkbox"/> +1 <input type="checkbox"/> +2 <input type="checkbox"/> +3 <input type="checkbox"/> +4		
<input type="checkbox"/> PLASMA PROTEIN <u>8.0</u>	gm/dl		COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE					
PLASMA COLOR: <input checked="" type="checkbox"/> NO ABNORMALITIES								
<input type="checkbox"/> HEMOLYZED								
<input type="checkbox"/> ICTERIC								
<input type="checkbox"/> LIPEMIC								
<input type="checkbox"/> FIBRINOGEN <u>200</u>	mg/dl							

51

REPORTED BY: _____

REPORT DATE: 7-21-94

113 CRB01
PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER PARASITOLOGY

MCY 28104 359
ANIMAL I.D.

4/4/94
DATE OF SAMPLE

INVESTIGATOR _____ REQUESTOR _____



ANIMAL DATA QUJ2-4
ROOM _____ CAGE _____

YR _____ MO _____ KG _____
AGE _____ WEIGHT _____

PROCEDURE IS _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ SEX _____ EXPERIMENTAL _____

CLINICAL SIGNS PROBLEMS <input type="checkbox"/> DIARRHEA		PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS	
HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/>		SOURCE OF SPECIMEN	
ROOM _____	CAGE _____	<input type="checkbox"/> FECES Fresh catch	<input type="checkbox"/> OTHER
PROCEDURE REQUESTED		<input checked="" type="checkbox"/> FECES Cage sample	
<input type="checkbox"/> DIRECT EXAMINATION		<input type="checkbox"/> SKIN SCRAPING EXAM	
<input checked="" type="checkbox"/> CONCENTRATION		<input type="checkbox"/> CRYPTOSPORIDIA SMEAR	
SEDIMENTATION FORMALIN ETHYLACETATE <input checked="" type="checkbox"/>		<input type="checkbox"/> OTHER	
FLOTATION ZINC SULFATE <input type="checkbox"/>			

FOR LABORATORY USE ONLY

APPEARANCE EXAMINATION	CONSISTENCY <u>formed</u>	COLOR <u>brown</u>
<input type="checkbox"/> RBC	<input type="checkbox"/> WBC	<input type="checkbox"/> OTHER

Balantidium coli		Entamoeba histolytica	
Blastocystis hominis		Giardia lamblia	
Chilomastix mesnili		Hexamita pitheci	
Cryptosporidium. NOS		Iodamoeba butschlii	
Entamoeba NOS		Trichomonas. NOS	
<u>H</u> Entamoeba coli		Trichuris trichiura	
Entamoeba hartmanni		No Parasites Seen	

REPORTED BY _____ REPORT DATE 4/28/94

CLINICAL PARASITOLOGY

1870

CALIFORNIA PRIMATE RESEARCH CENTER

I.D. 8713 PROJECT CODE CRB01

ANIMAL I.D. MCV 28104

HEMATOLOGY

DATE OF SAMPLE 4/4/94

INVESTIGATOR _____ REQUESTOR _____



ANIMAL DATA: 0052-4
HOME ROOM _____ CAGE _____

YR _____ MD _____ KG _____
AGE _____ WEIGHT _____

PROCEDURE IS: _____ DIAGNOSTIC AID _____ COLONY MANAGEMENT _____ EXPERIMENTAL _____

CLINICAL SIGNS / PROBLEMS:			PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:		
HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/>			ROOM _____ CAGE _____		
BLEEDING CONDITIONS: <input type="checkbox"/> Squeezed - limb pulled <input type="checkbox"/> Caught on run <input type="checkbox"/> Fasted _____ hrs <input type="checkbox"/> Anesthetized <input type="checkbox"/> Other _____					
<input checked="" type="checkbox"/> COMPLETE BLOOD COUNT; ELECTRONIC CELL COUNT, SMEAR EVALUATION, PLASMA PROTEIN, FIBRINOGEN					
<input type="checkbox"/> ELECTRONIC CELL COUNT			<input type="checkbox"/> SMEAR EVALUATION: TOTAL WBC _____ X 10 ³ /μl <input type="checkbox"/> CORRECTED WBC _____ X 10 ³ /μl		
WBC	<u>8.6</u>	X 10 ³ / μl	DIFFERENTIAL <u>(Anemia)</u> / μl		
RBC	<u>5.61</u>	X 10 ⁶ / μl	METAMYELOCYTES		
HEMOGLOBIN	<u>11.4</u>	gm/dl	BAND NEUTROPHILS		
HEMATOCRIT	<u>37.6</u>	%	SEG. NEUTROPHILS		
MCV	<u>67</u>	fl	LYMPHOCYTES		
MCH	<u>20.3</u>	pg	MONOCYTES		
MCHC	<u>30.3</u>	pg/fl	EOSINOPHILS		
PLATELETS	<u>2.92</u>	X 10 ⁵ / μl	BASOPHILS		
<input type="checkbox"/> RETICULOCYTES	%	_____ X 10 ⁵ / μl	OTHER		
<input type="checkbox"/> PCV (CENTRIFUGED)	%		NRBC/100 WBC		
<input type="checkbox"/> PLASMA PROTEIN	<u>7.3</u>	gm/dl	COMMENTS: <input type="checkbox"/> PARTIALLY CLOTTED SAMPLE		
PLASMA COLOR: <input checked="" type="checkbox"/> NO ABNORMALITIES <input type="checkbox"/> HEMOLYZED <input type="checkbox"/> ICTERIC <input type="checkbox"/> LIPEMIC					
<input type="checkbox"/> FIBRINOGEN	<u>100</u>	mg/dl			

PLATELETS
 ADEQUATE
 DECREASED +1 +2 +3
 INCREASED +1 +2 +3
 LARGE PLATELETS
 CLUMPED

ERYTHROCYTE MORPHOLOGY
 ESSENTIALLY NORMAL
 HYPOCHROMASIA +1 +2 +3 +4
 POLYCHROMASIA +1 +2 +3 +4
 LEPTOCYTOSIS +1 +2 +3 +4
 POIKILOCYTOSIS +1 +2 +3 +4
 ANISOCYTOSIS +1 +2 +3 +4
 ROULEAUX +1 +2 +3 +4

REPORTED BY: _____

REPORT DATE: 4/4/94

483 783

8713, CRB01
I.D. PROJECT CODE

CALIFORNIA PRIMATE RESEARCH CENTER

MCY 28104
ANIMAL I.D.

INVESTIGATOR REQUESTOR

MICROBIOLOGY

4/4/94
DATE OF SAMPLE

ANIMAL DATA: QJZ - 4
HOME ROOM CAGE

SEX YR MO KG
AGE WEIGHT

PROCEDURE IS: _____ DIAGNOSTIC AID COLONY MANAGEMENT _____ EXPERIMENTAL

CLINICAL SIGNS / PROBLEMS: <input type="checkbox"/> DIARRHEA	PRIOR THERAPY <input type="checkbox"/> NO <input type="checkbox"/> YES LIST ALL AGENTS:
HOSPITALIZED NO <input type="checkbox"/> YES <input type="checkbox"/>	SOURCE OF SPECIMEN(S) <i>Rectal Swab</i>

CULTURES REQUESTED	NEGATIVE RESULT		DIRECT MICROSCOPIC EXAMINATION
	NEGATIVE	NO GROWTH	
<input checked="" type="checkbox"/> SALMONELLA, SHIGELLA, YERSINIA, AEROMONAS	<input checked="" type="checkbox"/>		
<input type="checkbox"/> CAMPYLOBACTER			
<input type="checkbox"/> YERSINIA SUSPECT (EXTRA SWAB)			
<input type="checkbox"/> AEROBIC			
<input type="checkbox"/> ANAEROBIC			
<input type="checkbox"/> FUNGI			
<input type="checkbox"/> OTHER _____			

ORGANISMS IDENTIFIED	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

SENSITIVITY TO ANTIMICROBIAL AGENTS: KIRBY-BAUER

ORGANISM NUMBER	AMIKACIN (AM 30)	AMPICILLIN (AM 10)	AUGMENTIN (AMC 30)	CEFAZOLIN (CZ 30)	CEFTRIAXONE (CRO 30)	CHLORAMPHENICOL (C 30)	CLINDAMYCIN (CC 2)	DOXYCYCLINE (D 30)	ENROFLOXACIN (ENO 5)	GENTAMICIN (GM 10)	NEOMYCIN (N 30)	OXACILLIN (OX 1)	PENICILLIN (P 10)	SULFA/ TRIMETH (SXT 25)	VAHCOMYCIN (VA 30)

COMMENTS:
REPORTED BY: _____

REPORT DATE: 4/6/94

CLINICAL MICROBIOLOGY

White - Animal's Chart Yellow - Laboratory Pink - Requestor Goldenrod - Clinical Pathologist