# **Division of Comparative Medicine Animal Health and Environmental Concerns**

## University of South Florida Facility: Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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| **Room** | **Species** | NSC\* √ =none  AM PM | | **Health•  and Environmental+**Concerns   **•** (IACUC#, Animal/Cage#) + (State Concern) | Tech AM PM | | AcknowledgementName & Phone # contacted |
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NSC\* =No Significant Concerns