**Health Summary Document**

### Client information

| **Name** |  |
| --- | --- |
| **Phone** |  |
| **Address** |  |
| **Email** |  |

### Patient Information

| **Name** |  |
| --- | --- |
| **Breed** |  |
| **DOB or Age** |  |
| **Gender** |  |
| **Microchip Number** |  |

### Veterinary Clinic Information

| **Visit Date** | **Clinic Name** | **Phone Number** |
| --- | --- | --- |
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### Vaccinations

| **Vaccine** | **Date** | **Manufacturer tag number** |
| --- | --- | --- |
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### Medical information

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** |
| --- | --- | --- | --- | --- | --- |
| **Weight** |  |  |  |  |  |
|  |  |  |  |  |  |
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### Patient Alerts

* **Alert 1**
* **Alert 2**

### Medications

| **Medicine Name** | **Strength** | **Number** | **RX description** |
| --- | --- | --- | --- |
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### Laboratory graphs

**Chemistry**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
| --- | --- | --- | --- | --- | --- | --- |
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**CBC**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
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**Endocrinology**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
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**Urinalysis**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
| --- | --- | --- | --- | --- | --- | --- |
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**Heartworm test:**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
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**Fecal results:**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
| --- | --- | --- | --- | --- | --- | --- |
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**Other Tests:**

| **Marker** | **Date 1** | **Date 2** | **Date 3** | **Date 4** | **Date 5** | **Date 6** |
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### Imaging

**Radiographs:**

| **Date** | **Position** | **Results** |
| --- | --- | --- |
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**Ultrasound:**

| **Date** | **Results** |
| --- | --- |
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