



Physical Exam Sheet

I 632

_____ (Name of the pet)

When problems arise, this page can be used to record basic data on a pet. Compare these numbers with the ones previously collected in the Health Record on page I 10 of the Appendix. For help with collecting the following information, see Section B.

Date and Time							
Heart Rate (Beats/Min)							
Respiratory Rate (Breaths/Min)							
Temperature (Degrees Fahrenheit)							
Capillary Refill Time (CRT) in Sec.							
Mucous Membranes							
Skin Tent (Y=Yes, N=No)							

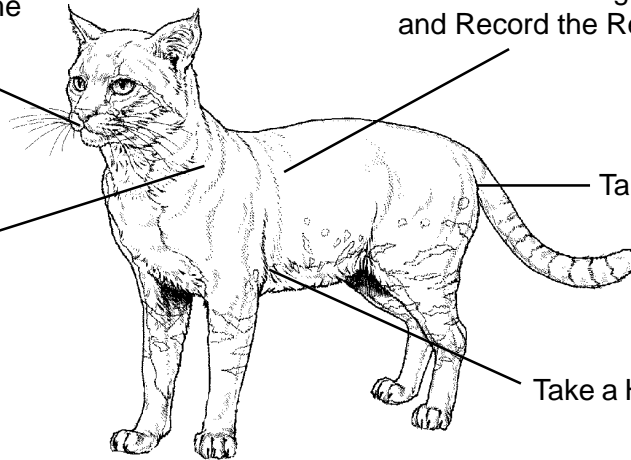
Check the Mucous Membranes and Capillary Refill Time

Listen to the Lungs and Trachea, and Record the Respiratory Rate

Check Skin Tent

Take a Temperature

Take a Heart Rate



Problems Noted:

Once a problem has been identified, it is advisable to contact a veterinarian. If any of the following occurs, contact a local veterinarian immediately:

1. The skin tents and remains raised/tented.
2. The temperature, respiratory, and heart rates remain abnormally high or low.
3. The pet is experiencing pain that does not subside.
4. Any of the problems identified on page E200 occur.