

Admissions and Records Checklist

ID _____ Name _____ Date _____

Admission

- | | | | |
|----------------------------|--------------------------|----------------------|--------------------------|
| Checked for tags | <input type="checkbox"/> | Photos | <input type="checkbox"/> |
| Physical Exam | <input type="checkbox"/> | Weight | <input type="checkbox"/> |
| Basic Neurological Exam: | | Measurements | <input type="checkbox"/> |
| Gape | <input type="checkbox"/> | Temperature | <input type="checkbox"/> |
| Palpebral | <input type="checkbox"/> | Corneal Stain & Exam | <input type="checkbox"/> |
| Nutritional Assessment | <input type="checkbox"/> | | |
| Blood Pulled: i-STAT | <input type="checkbox"/> | PCV/TS | <input type="checkbox"/> |
| External parasites removed | <input type="checkbox"/> | Out lab | <input type="checkbox"/> |
| Radiographs | <input type="checkbox"/> | | |
| Treatment Plan | <input type="checkbox"/> | | |

Stranding Report

- | | |
|------------------------|--------------------------|
| Copy in chart | <input type="checkbox"/> |
| Enter in database | <input type="checkbox"/> |
| Photos in digital file | <input type="checkbox"/> |

Blood work

- | | |
|---------------|--------------------------|
| Copy in chart | <input type="checkbox"/> |
|---------------|--------------------------|

Feeding Chart

- | | |
|---------------|--------------------------|
| Copy in chart | <input type="checkbox"/> |
|---------------|--------------------------|

Deworming

- | | |
|-----------------|--------------------------|
| Deworm complete | <input type="checkbox"/> |
|-----------------|--------------------------|

Surgery Report

- | | |
|---------------|--------------------------|
| Copy in chart | <input type="checkbox"/> |
|---------------|--------------------------|

Tagging/Release Form

- | | |
|--------------------------|--------------------------|
| Copy in chart | <input type="checkbox"/> |
| Copy in digital file | <input type="checkbox"/> |
| Tags entered in database | <input type="checkbox"/> |

Necropsy

- | | |
|----------------------|--------------------------|
| Copy in chart | <input type="checkbox"/> |
| Copy in digital file | <input type="checkbox"/> |

Disposition

- | | |
|---------------------|--------------------------|
| Entered in database | <input type="checkbox"/> |
|---------------------|--------------------------|