

Please check your address details and cat's details above are correct.

Reason for admission: Blood glucose curve

Contact phone number (Circle above) OR: \_\_\_\_\_

What is the current insulin dose: \_\_\_\_\_ Type (circle): glargine / caninsulin

What time was insulin last given? \_\_\_\_\_

Is your cat drinking MORE / THE SAME / LESS (circle) since your last visit?

24 hour water intake if known: \_\_\_\_\_

Is your cat doing well at home? Y / N

Comments if not well? \_\_\_\_\_

At discharge do you need more insulin? Y / N

At discharge do you need more syringes? Y / N Number (100 per box) \_\_\_\_\_

Any comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_