

Mayfair Animal Hospital

1130 SW Maynard Road

Cary, NC 27513

Blood Glucose Curve

Date: _____

Arrival Time: _____

Pet Name: _____

Patient Number: _____

Doctor: _____

Owner: _____

Emergency Contact #: _____

Insulin Type: _____

Food Brand/Type: _____

Amount Insulin Given : _____ Units in am

Daily Amount: _____

_____ Units in pm

Time Insulin Last Given: _____

Last feeding: _____

Total # in Glucose Series: _____

8 am _____

11 am _____

2 pm _____

5 pm _____

9 am _____

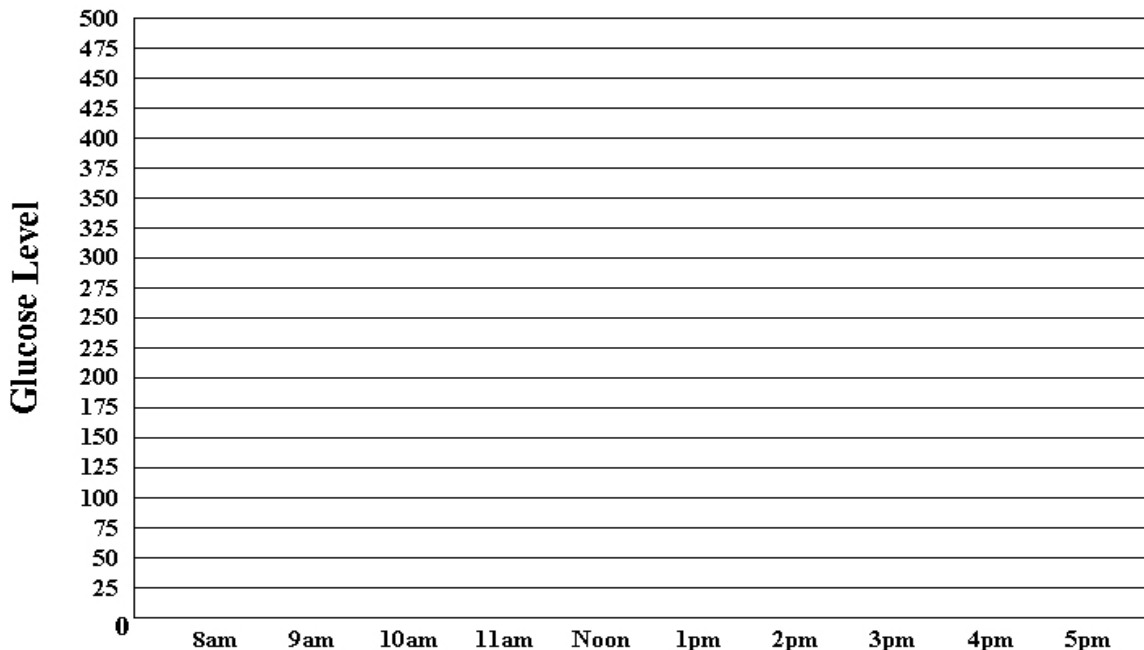
12 pm _____

3 pm _____

10 am _____

1 pm _____

4 pm _____



Normal Ranges

Cat: 75 - 199

Dog: 67 - 147

Comments: _____

