Fecha: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Paciente\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Historia\_\_\_\_\_\_\_\_\_\_\_ No Int.\_\_\_\_\_\_\_

Especie\_\_\_\_\_\_\_\_\_Sexo\_\_\_\_\_\_\_\_Raza\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Color\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Edad\_\_\_\_\_\_\_\_\_\_\_Propietario\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dirección\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Celular\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Procedencia\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nutrición\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estado Reproductivo\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Vacunación\_\_\_\_\_\_\_\_\_\_\_\_\_\_Desparacitación\_\_\_\_\_\_\_\_

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| Fecha  | Medicamento | Dosis(mg/kg) | Via | Frecuencia | Tiempo |
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Observaciones\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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| **CONTROL DE HOSPITALIZACIÓN** |
| **DATOS DEL PROPIETARIO** | **DATOS DEL PACIENTE** |
| Nombre: | Nombre: |
| Cedula: | Especie: | Sexo:  |
| Celular: | Raza: | Color: |
| Dirección: | Peso: |
| **ANAMNESICOS** |
| Parámetros | Día 1 | Día 2 | Día 3 | Día 4 | Día 5 | Día 6 | Día 7 | Día 8 |
| Horario  | am | pm | am | pm | am | pm | am | pm | am | Pm | am | pm | am | pm | am | pm |
| T° |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fc Cardiaca |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fc Respiratoria |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mucosas |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Apetito |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vomito |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Diarrea |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Otros hallazgos |
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| **TRATAMIENTO** |
| . | Día 1 | Día 2 | Día 3 | Día 4 | Día 5 | Día 6 | Día 7 | Día 8 |
| Productos/dosis | am | pm | am | pm | am | pm | am | pm | am | Pm | am | pm | am | pm | am | pm |
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| **OBSERVACIONES** |
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| Médico Veterinario  |
| Estudiantes  |
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