**Wildlife Hospitalisation Sheet**

**Species: Reference No:**

**Cage No: Chip/Ring No:**

**Date admitted: Reason for Admission:**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **DATE** | **WEIGHT** | **TIME** | **CFW** | **U+F** | **INTS** | **MEDS** | **Observations / Plan**  |
|  |  | **AM** |  |  |  |  |  |
| **PM** |  |  |  |  |  |
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| **Amount** | **Medication** | **Signature** |
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