



Animal Hospital of Beeton

Blood Glucose Curve Form

Complete the blood glucose curve form below or online at www.ahbeeton.ca under the Forms tab.

Date: _____

GENERAL INFORMATION

Owner's Name*

Pet's Name*

Email*

PET'S BACKGROUND

Date of Curve

(MM|DD|YYYY)

Insulin Type

Caninsulin Lantus Other

Insulin Dose Time of Administration

(HR|MIN|AM/PM)

Food Brand

Food Type

Dry Canned Mix Other

Amount Fed Per Day

Meal Times

Clinical Signs (drinking/urinating more,
lethargy, etc.)

Glucometer Name

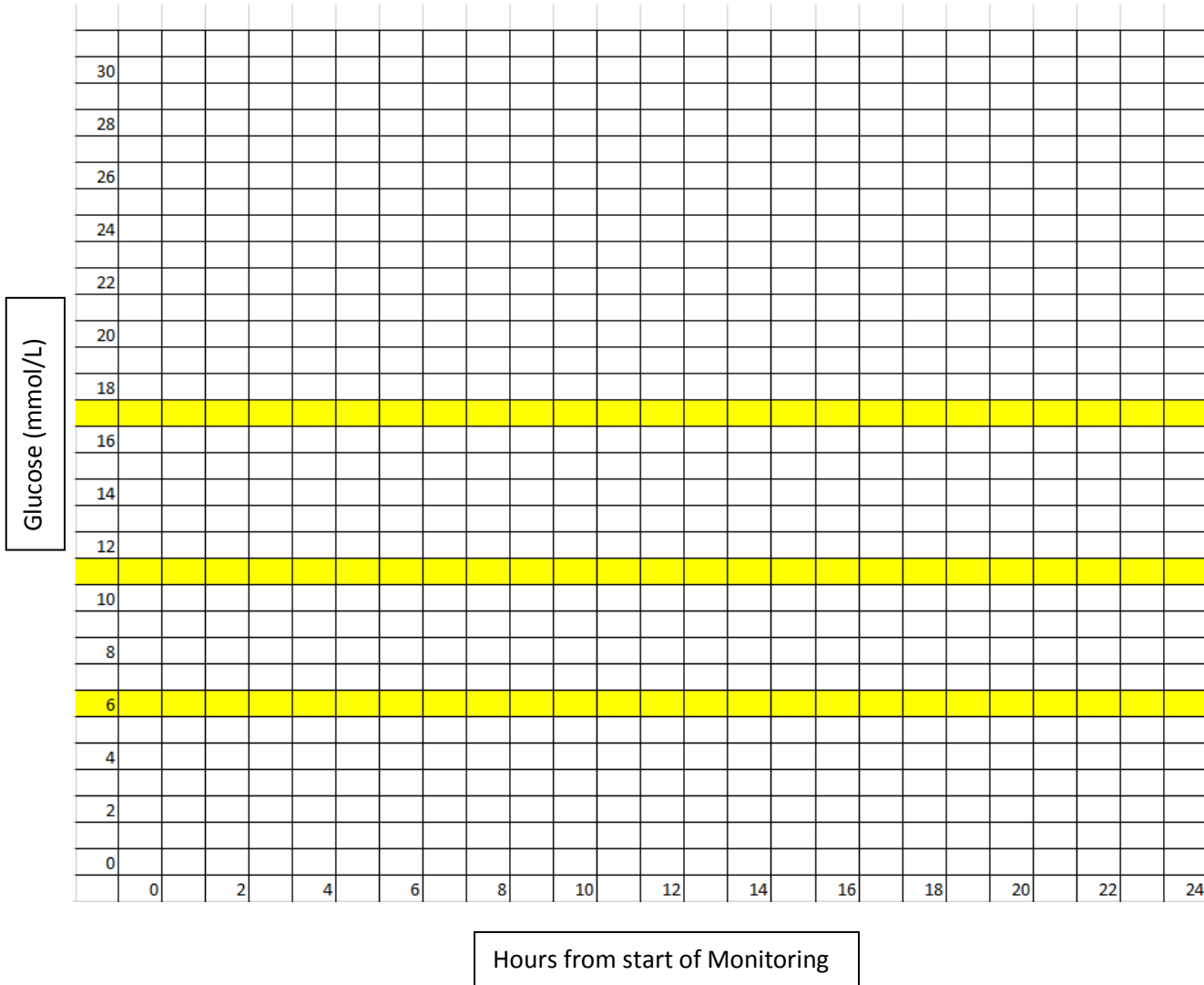
Where Pets are Family. www.ahbeeton.ca
60 Main St W, Box 520, Beeton Ontario, L0G 1A0; t 905-729-2929; f 905-729-0777





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Please record the time of injection(s) given on the graph



6 = minimum suitable level for blood glucose in dogs and cats

11 = maximum suitable level for dogs without cataracts

16 = maxwarm

imum suitable level for dogs with cataracts and cats

