



SHORELINE  
VETERINARY  
HOSPITAL

**DIABETIC PATIENT INFORMATION SHEET**

A glucose curve is a variable event. Plan to leave your pet for at least 8-10 hours. We will keep your pet cozy and comfortable and call you when the curve is finished.

Date: \_\_\_\_\_

Client Name: \_\_\_\_\_ Patient's Name: \_\_\_\_\_

Diet

1. What type of food does your pet eat? \_\_\_\_\_
2. How much food do you feed? \_\_\_\_\_
3. List any snacks that you feed and approximately how many each day.  
\_\_\_\_\_  
\_\_\_\_\_
4. Did you feed your pet today? \_\_\_Yes \_\_\_No      What time? \_\_\_\_\_
5. How would you describe your pet's appetite lately?  
\_\_\_\_\_Normal      \_\_\_\_\_Increased      \_\_\_\_\_Decreased
6. Please describe your pet's frequency and volume of urination.  
\_\_\_\_\_Normal      \_\_\_\_\_Increased      \_\_\_\_\_Decreased
7. How has your pet's thirst been lately?  
\_\_\_\_\_Normal      \_\_\_\_\_Increased      \_\_\_\_\_Decreased

Insulin

1. Type of insulin: \_\_\_\_\_
2. What time of day do you administer the insulin? \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.
3. Amount of insulin administered \_\_\_\_\_
4. What time did your pet receive insulin this morning? \_\_\_\_\_

How do you feel your pet is doing overall (attitude/behavior changes, etc.)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Best Number to Reach you at today: \_\_\_\_\_

Owner signature \_\_\_\_\_