

EMM Case Study Form

Name.....Date.....

Owner.....Breed.....

Address.....

Discipline.....Age.....

Condition: Poor Good Excellent Overweight Underweight

Current Complaint.....

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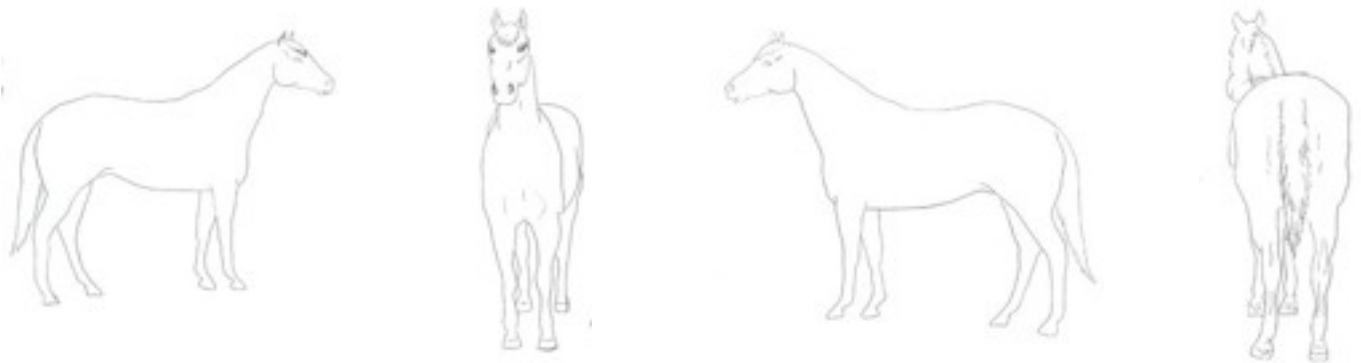
Assessment.....

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Treatment.....

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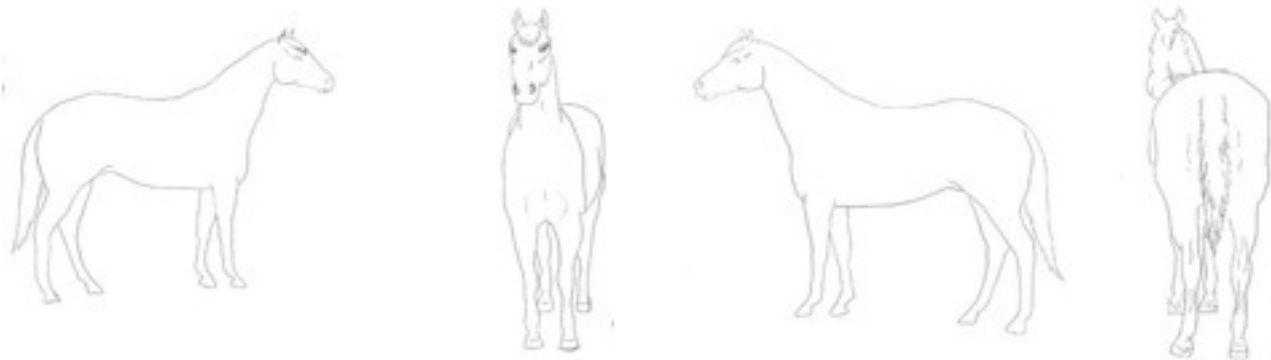
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2nd Assessment.....

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Treatment.....

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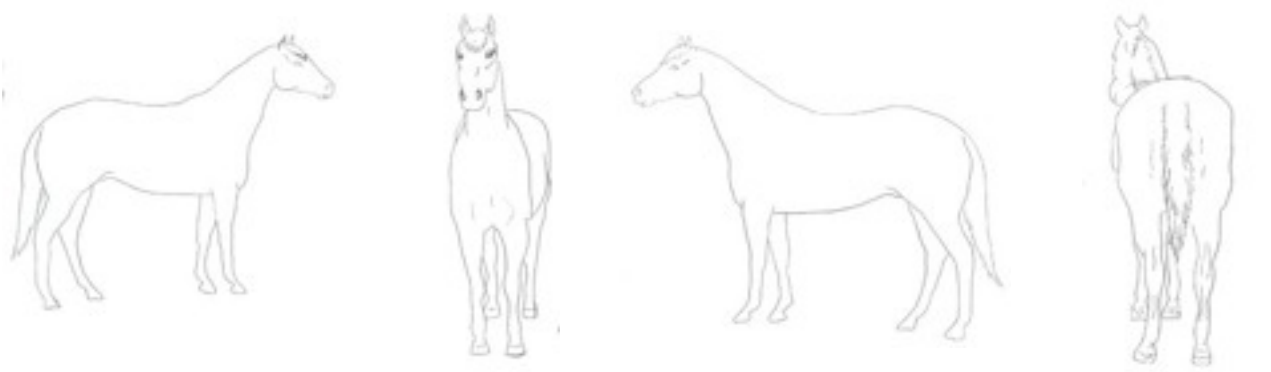
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3rd Assessment.....

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Treatment.....

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