

# Well Puppy Exam

Puppy name: \_\_\_\_\_ Reg. # \_\_\_\_\_ sex: \_\_\_\_\_ Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ color: \_\_\_\_\_ weight: \_\_\_\_\_

Sire: \_\_\_\_\_ HSDAA# \_\_\_\_\_

Dam: \_\_\_\_\_ HSDAA# \_\_\_\_\_

**Eyes:**

Appear Normal: \_\_\_\_\_ Other: \_\_\_\_\_

**Ears:**

Appear Normal: \_\_\_\_\_ Other: \_\_\_\_\_

**Heart:**

Appear Normal: \_\_\_\_\_ Other: \_\_\_\_\_

**Mouth/Teeth**

Appear Normal: \_\_\_\_\_ Other: \_\_\_\_\_

**Testicles:**

Normal: \_\_\_\_\_ Other: \_\_\_\_\_

**Patellas:**

Normal: \_\_\_\_\_ Other: \_\_\_\_\_

**Umbilical:**

Normal: \_\_\_\_\_ Other: \_\_\_\_\_

Notes: \_\_\_\_\_

**Veterinarian Signature:** \_\_\_\_\_

Veterinarian Name

Address

phone

**De-Worming Record:**

\_\_\_\_\_

**Vaccination Record:**

\_\_\_\_\_