

VITAL SIGNS EXAM

Use this form to complete a Vital Signs Exam on a human or animal!

Type of Patient:

Doctor's Name:

Draw a circle around the type of patient in this exam.



Patient Information: Patient Name: Breed: Age: Gender: Hair Color: Patient Vital Signs: Draw a happy face if the vital signs are good and a sad if the vital signs are bad. Heart Rate: Respitory Rate: Gut Sounds: Temperature: