

VETERINARY HEALTH RECORD

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 136; DoD Directive 5136.01; Army Regulation 40-905, SECNAVINST 6401-1B; AFI 48-131.

PRINCIPAL PURPOSE(S): To establish and maintain health records of animals and to locate animal owners for follow-up notification of care or treatment received.

ROUTINE USE(S): The information may be used to aid in preventive health and communicable disease control programs, report medical conditions required by law to Federal, state, and local agencies. The DoD Blanket Routine Uses found at: http://dpclo.defense.gov/privacy/SORNs/blanket_routine_uses.html may also apply.

DISCLOSURE: Voluntary. However, if you fail to provide the requested information, the animal will not be provided veterinary care.

1. SPONSOR DATA

a. NAME <i>(Last, First, Middle Initial)</i>		b. GRADE OR RANK	
c. HOME ADDRESS <i>(Street, City, State, Zip Code)</i>		d. PERSONAL TELEPHONE NO. <i>(Include Area Code)</i>	
		e. DUTY STATUS <i>(X one)</i>	
		f. RESIDENCE <i>(X one)</i>	
		<input type="checkbox"/> ACTIVE <input type="checkbox"/> RETIRED <input type="checkbox"/> ON POST <input type="checkbox"/> OFF POST	
g. ORGANIZATION		h. DUTY PHONE <i>(Include Area Code)</i>	

2. ANIMAL DATA

a. NAME	b. SPECIES	c. BREED	d. COLOR	e. DATE OF BIRTH	f. SEX	g. MICROCHIP #
---------	------------	----------	----------	------------------	--------	----------------

3. IMMUNIZATION DATA

a. DATE	b. VACCINE TYPE	c. MANUFACTURER	d. LOT NUMBER	a. DATE	b. VACCINE TYPE	c. MANUFACTURER	d. LOT NUMBER

4. LABORATORY PROCEDURES

a. DATE	b. LABORATORY TEST - RESULT - REMARKS	a. DATE	b. LABORATORY TEST - RESULT - REMARKS

5. MASTER PROBLEM LIST

a. PROBLEM NO.	b. DESCRIPTION	c. DATE ENTERED	d. DATE RESOLVED