



Fitness test Bulldog

Dog

Name:			
ID number:		Registrationnumber	
Date of birth:		Sex:	
Weight:	kg	normal weight / moderate obesity (2-3 kg) / obese *	
Bodyscore:		height: cm	Breast girth: cm length: cm

Owner

Name	<input type="text"/>		
Adress	<input type="text"/>	Zip/postal code	<input type="text"/>
City	<input type="text"/>	Country	<input type="text"/>
E-mail	<input type="text"/>		

Before test

Pulse		observations:	
Body temperature			
Respiration	Normal / stridor mouth closed / costoabdominal / moderate panting / panting/ some wheezing / wheezing*		

Surroundings

Temperature	°C	Humidity	
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Fitness test

1000m walking

start test time:		end test time:		Time walking:	
during test					
Difficulties walking	YES / NO*				
Lame/limping	YES / NO*				
Vomiting	YES / NO				
Other					
	Time	Pulse	Body temperature	Respiration	
Directly after test					
5 min. after test					
10 min. after test					
15 min. after test					
Complete recovery					

* delete if inapplicable.



Observations:

I DID verify tattoo/microchip on this dog

Veterinarian

Name

Address

Zip/postal code

City

Country

E-mail

Signature

I hereby certify that the animal examined is the animal described on this application. To my knowledge this dog has had no medical operations and/or had any kind of medication administered that might influence the outcome of the test.

Signature owner