

**ABVP CASE LOG**

Name:

Institution/Practice:

CA EQ AV FA DA BF SW

No.	Date	Case #	Species	Diagnosis	S/M	Procedure	P/A	E/M	D/N	System Code	Disposition

**Instructions:**

1. This is the required case log format. All case logs must be typed.
2. Resident should submit three (3) copies of case logs.
3. Specific instructions:
  - a. Number cases consecutively throughout the program.
  - b. Date = date of assignment or examination.
  - c. Case # = clinic or institutional case number assigned.
  - d. S/M = surgical or medical case.
  - e. Procedure = brief description of the procedure or problem. Please clarify any abbreviations.
  - f. P/A = primary or assistant person on the case.
  - g. E/M = elective (E) or emergency (M).
  - h. D/N = diplomate or advisor present (D) or not (N).
  - i. Systems code = code for system or discipline involved. See codes below.
  - j. Disposition = results of therapy, condition of the animal (e.g. discharged, improved, normal, died, etc.)
4. Systems codes

Neurologic	NE	Musculoskeletal	MS	Otic	OT
Cardiovascular	CV	Respiratory	RS	Hematopoietic	HE
Endocrine	EN	Gastrointestinal	GI	Toxicologic	TX
Ophthalmic	OP	Reproductive	RP	Other	OR
Integumentary	IT	Renal/urinary	RU		