KITTEN WELLNESS LOG

Use this log to record each kitten 2x daily – in the morning and in the afternoon/evening. If you spot changes in appetite, behavior, or bodily functions, contact a staff member right away.

Animal Name: _____ ***ID#:*** _____

Color/Markings: _____ ***Age At Intake:*** _____

Notes: _____

Feeding Stage: *(circle all that apply)* ***Bottle Slurry*** ***Wet Kitten Food*** ***Dry Kitten Food***

Date Time	Weight	Appetite	Urine	BM	Time of Last Feeding	Medical Notes

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