



UNIVERSITY OF CINCINNATI  
LABORATORY ANIMAL MEDICAL SERVICES

**EMERGENCY**

**ANIMAL HEALTH NOTIFICATION**  
For calves, cats, dogs, goats, pigs, rabbits, & sheep only

FMSOP700.2

REVISION: B

EFFECTIVE DATE: 3/15/2009

- Print on orange 8.5 x 5.5 paper.
- Document submission and attach in FMSOP700.3 (Individual Animal Health Record) after veterinary assessment.

Date Submitted/Time: \_\_\_\_\_ Reported by: \_\_\_\_\_

Investigator: \_\_\_\_\_ Sub-Investigator: \_\_\_\_\_ Protocol # \_\_\_\_\_

Species: \_\_\_\_\_ Sex:  Male  Female Receiving date: \_\_\_\_\_

Animal ID #: \_\_\_\_\_ Bldg: \_\_\_\_\_ Room #: \_\_\_\_\_

Notified Investigator:  Yes (circle one): Phone / Voice mail / Email Time of Notification: \_\_\_\_\_

Chief Complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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