*(Template example)*

**Australian and New Zealand College of Veterinary Scientists**

**Activity Log Summary (By Body System)**

**Refer to the Subject Guidelines for the appropriate Category listing. The following categories are examples only.**

**NAME: SUBJECT: DATE:**

**Number of Cases**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CATEGORY | JAN | FEB | MAR | APRIL | MAY | JUNE | JULY | AUG | SEPT | OCT | NOV | DEC | Current TOTAL | PreviousTOTAL | **Cumulative****TOTAL** |
| SKIN/SUBCUTIS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| MUSCULOSKELETAL |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NEUROLOGIC |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| CARDIOVASCULAR |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HERNIA/BODY CAVITIES |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| EYE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| EAR |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HAEMOLYMPHATIC |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ENDOCRINE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| RESPIRATORY |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| URINARY |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REPRODUCTIVE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ALIMENTARY |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Current TOTAL |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Previous TOTAL |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Cumulative TOTAL |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |