

**STUDY NAME:**

# LOG SHEET

**Canine Leptospirosis Surveillance, Puerto Rico**

**Clinic/Shelter Name:** \_\_\_\_\_

Study ID (ex. A003)	Owner Last Name (write "N/A", if)	Dog's Name	Gender	Date Illness Onset (mm/dd/yy)	Lepto Rapid Test #1 (Date: m/dd/yy)	Lepto Rapid Test #2* (Date: m/dd/yy)	Specimens Collected for Shipment Select all that apply. (Date: m/dd/yy)
Place ID label here			<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> MC <input type="checkbox"/> FS		<b>Date:</b> ___/___/___ <input type="checkbox"/> Negative <input type="checkbox"/> Positive	<b>Date:</b> ___/___/___ <input type="checkbox"/> Negative <input type="checkbox"/> Positive	<b>Date:</b> ___/___/___ <input type="checkbox"/> Blood <input type="checkbox"/> Serum <input type="checkbox"/> Urine (cysto) <input type="checkbox"/> Urine (free catch) <input type="checkbox"/> Kidney Tissue <input type="checkbox"/> Kidney Culture
Place ID label here			<input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> MC <input type="checkbox"/> FS		<b>Date:</b> ___/___/___ <input type="checkbox"/> Negative <input type="checkbox"/> Positive	<b>Date:</b> ___/___/___ <input type="checkbox"/> Negative <input type="checkbox"/> Positive	<b>Date:</b> ___/___/___ <input type="checkbox"/> Blood <input type="checkbox"/> Serum <input type="checkbox"/> Urine (cysto) <input type="checkbox"/> Urine (free catch) <input type="checkbox"/> Kidney Tissue <input type="checkbox"/> Kidney Culture
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**Gender:** M = male      MC = male, castrated  
 F = female      FS = female, spayed

\*Lepto Rapid Test #2: Perform test #2 if the first lepto rapid test was negative and blood was collected <7 days after symptom onset.