

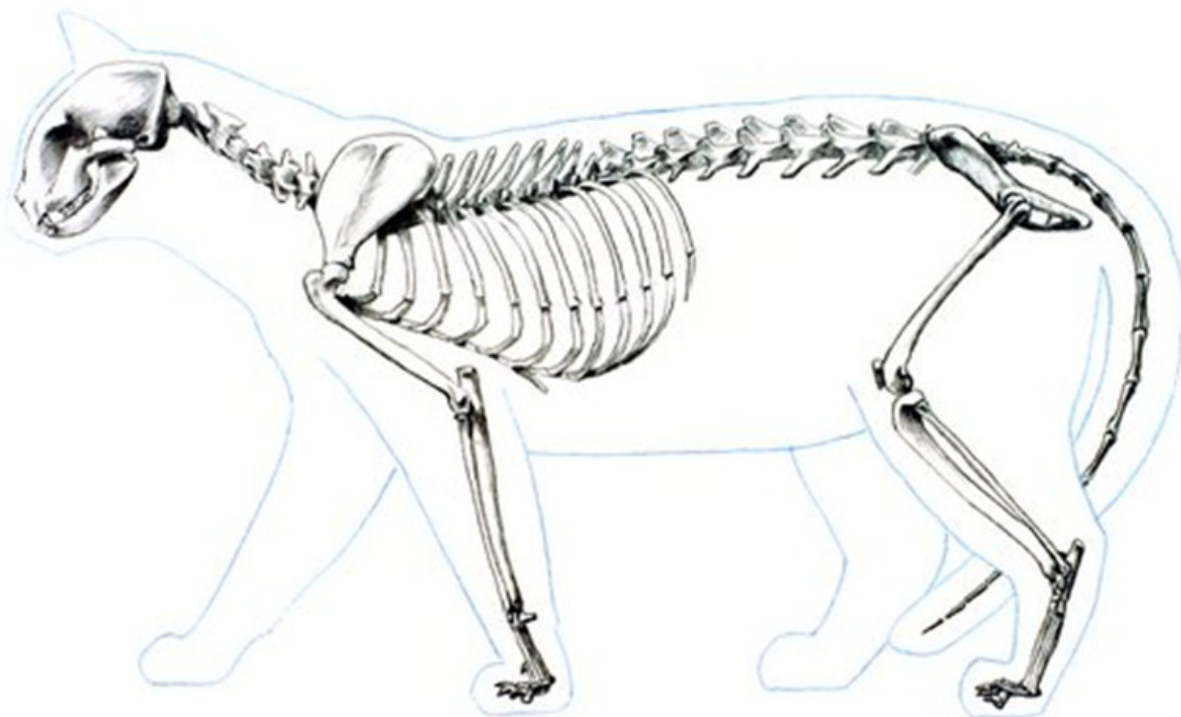
## SKELETAL LESIONS

Date \_\_\_\_\_ Investigating Agency \_\_\_\_\_

Case# \_\_\_\_\_ Officer \_\_\_\_\_ Veterinarian \_\_\_\_\_

Animal ID \_\_\_\_\_ Breed \_\_\_\_\_ Color \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Record injuries or abnormalities to skeleton. Describe on diagram or comments section.



**COMMENTS:**