



Seizure diary

PET'S NAME:

MONTH: Jan / Feb / Mar / Apr / May / Jun / Jul / Aug / Sep / Oct / Nov / Dec

- Tick the appropriate boxes below
- Make notes about each seizure on the next page
- Show this to your vet at each check-up
- **Contact your vet straight away if your pet has two or more seizures in 24 hours or has a seizure that lasts more than two minutes**

Number of seizures per day	6																																	
	5																																	
	4																																	
	3																																	
	2																																	
	1																																	
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
		Day of the month																																



Seizure diary

Date	Seizure length	Notes <small>(What were they doing beforehand? Any warning signs? What happened during? How long did it take them to get back to normal after?)</small>