| **Naam:** | | | | **Geboortedatum:** | | | |
|---|---|---|---|---|---|---|---|
| | **INPUT** | | **OUTPUT** | | | | |
| **Tijd** | **Voeding** | **Vocht** | **Urine** | **Defecatie** | **Braken** | **Drain 1** | **Drain 2** |
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| **TOTAAL** | | | | | | | |