

DOG'S NAME: _____ **YOUR LAST NAME:** _____

DOG'S MEDICAL (Current and/or Historical) Please provide any details that will assist us in better caring for your dog. Vet treated or merely recognized. Example: seizures (even one), joint pain/issues, etc.

Medication, Treatment or Supplement Complete a section for EACH.

Please be specific and provide all details. *If needed, please print a second sheet for this area or complete on back.* We ask that you also bring the product your dog prefers to receive their meds in, i.e., cheese, peanut butter, pill pockets.

Medication Name: _____

Treatment for: _____

Will the course of treatment be completed while in our care? Yes No

Capsule Tablet Ointment

Injection Drops Spray

Powder Other, Describe: _____

Time Given: AM Midday PM

Other, Describe: _____

Administered: Eats as treat Oral In meal

Injection Site: _____

Other instructions: _____

Medication Name: _____

Treatment for: _____

Will the course of treatment be completed while in our care? Yes No

Capsule Tablet Ointment

Injection Drops Spray

Powder Other, Describe: _____

Time Given: AM Midday PM

Other, Describe: _____

Administered: Eats as treat Oral In meal

Injection Site: _____

Other instructions: _____

Medication Name: _____

Treatment for: _____

Will the course of treatment be completed while in our care? Yes No

Capsule Tablet Ointment

Injection Drops Spray

Powder Other, Describe: _____

Time Given: AM Midday PM

Other, Describe: _____

Administered: Eats as treat Oral In meal

Injection Site: _____

Other instructions: _____

INSULIN TREATMENT

Insulin Brand/Type: _____

Amount/UNITS: _____

Syringe Type: U-100 U-40

Time Given: AM PM

To combine: Shake Roll

Injection Site: Shoulder Blades Back Hips

Other: _____

Only eats **HALF** of meal: Give FULL Amount

Give HALF Amount

Do NOT Give

Does **NOT** eat 1 meal: Give FULL Amount

Give HALF Amount

Do NOT Give

***Please know that if either of these situations happen consecutively, we will be in contact with you.**

Other instructions: _____
