

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Pet

Name: \_\_\_\_\_

Description of Problem:

\_\_\_\_\_

Duration of Problem: \_\_\_\_\_ o Days o Weeks o Months o Years

Present treatments/medications (list time last given):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Medications given today? o Yes o No

Food presently fed? \_\_\_\_\_ Fed today? o Yes o No

**Signs: (Please choose even if normal)**

**Vomiting:** o Yes o No o Don't know

If yes: When did vomiting start? \_\_\_\_\_

Any access to any other foods or trash? o yes o no

Diet change? o Yes o no

**Diarrhea:** o Yes o No o don't know

If yes: When did diarrhea start? \_\_\_\_\_

o Straining o Mucus o Blood

**Coughing:** o Yes o No o Don't know

Please describe cough:

\_\_\_\_\_

When did cough start?

\_\_\_\_\_

Eating o Yes o No o Don't know

Bowel Movements o Normal o Abnormal o None o Unknown

Urination o Normal o Increased o Decreased o None o Unknown

Water Consumption o Normal o Increased o Decreased o None o Unknown

Activity Level o Normal o Increased o Decreased o Unknown

Appetite o Normal o Increased o Decreased o Unknown

**Any other problems or concerns?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please list everything you are leaving with your pet (i.e. food, medications, leash, collar, etc.):**

\_\_\_\_\_

\_\_\_\_\_

**If you need a refill on any prescriptions, please list them below. Please specify if you require a written prescription.**

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**Contact Number:** \_\_\_\_\_ or \_\_\_\_\_

**YES**, I authorize any additional charges for treatment that the doctor feels is necessary up to \$ \_\_\_\_\_ dollar amount.

**NO**, I do **NOT** give any treatments other than those previously discussed without my authorization.

**PLEASE READ AND SIGN BELOW:**

We will call you when your pet is ready to be discharged and schedule a time for you to pick up. Please understand that our pick up times are determined by the events of our day and ability to complete the evaluation/procedures on your pet as well as others. Due to unforeseen emergencies and critical patients already in the hospital <animal> may not be released until the evening. Please wait for a phone call from us before showing up to pick up <animal>, as your animal may not be ready to go. To prevent long waits, we strongly recommend not showing up without a scheduled time. We understand that it is hard waiting in the area or by the phone for your pet when it is ill, but it does not speed the process up by waiting in the clinic. You are welcome to call us anytime during the day to check on your pet. Our pick up times can sometimes range from 5:00 PM to 8:00 PM.

You will be responsible for the cost of all services rendered during <animal>'s stay at the time of discharge unless previous arrangements have been made. Interest will be applied to all overdue accounts and balances not paid in full without prior arrangements. We accept cash, checks, Visa, MasterCard, Discover, and American Express. We also subscribe to an independent credit agency (Care Credit) that can grant short term credit with no interest. A credit application would be necessary and response is nearly immediate. Please request an estimate so that you will be aware of approximate costs. Your bill should be up to date at the end of each business day and you may call for a daily update or ask us to update you at any interval. We understand the realities of financial situations and <animal>'s illness. If there is a limit to the amount of finances that can be committed to this visit, please inform us so that we can inform you if the treatment for <animal>'s condition is approaching or is beyond that level and a reevaluation is warranted. At all times, we will offer you our best medical advice on how to proceed in <animal>'s best interest but we must know any limitations that will be placed at the earliest possible time.

**By signing below you are stating that you have read and understand the above information.**

Owner's signature \_\_\_\_\_

**Please inform us if you have had a change in phone number or address so that we may bring our records up to date and can reach you in case of an emergency.**

Medications:

<*animal-notes*>