

FELINE WELL EXAM

Please complete and return to Canine Clubhouse 48 hours prior to your scheduled Clubhouse call

1. Have you noticed any problems with your pet such as abnormal appetite / urination / defecation, change in behavior, lumps on the skin, limping, etc? Yes No
If yes, please describe:

2. What food do you feed your pet?

3. How much do you feed and how often?

4. What type of flea / tick prevention do you give?

5. Is your pet on any medications currently? Yes No
Please list any supplements, over the counter medications (aspirin, Benadryl, etc), and all prescribed by the veterinarian. Include dosing, frequency, and when it was last given.

6. AHDC recommends annual fecal testing. Intestinal parasites can cause disease in your pet and be passed to other animals and people in your home. Many of these parasites can be picked up from the soil or be carried in on your shoes/clothing. Would you like to have a fecal sample checked for intestinal parasites today? Yes No

7. Have you seen any fleas or ticks on your pet? Yes No

8. For cats that spend time outdoors unsupervised, AHDC recommends regular testing for Feline Leukemia Virus (FeLV) and Feline Immunodeficiency Virus (FIV). These viruses are passed from cat to cat through saliva, blood, and other bodily fluids. Would you like to have your cat tested for FeLV and FIV today? Yes No

9. Do you provide dental care for your pet (ie. brushing, dental diet, water additives)? Yes No
If yes, please describe

10. We recommend annual wellness bloodwork that may reveal underlying conditions including kidney, liver, and thyroid diseases (for pets over 7 years). The bloodwork may show changes before you notice symptoms in your pet. Wellness bloodwork is also essential to provide a normal baseline for your pet that can be monitored for changes as they age. This bloodwork includes a fecal sample for all pets and a urine sample for cats over 7 years of age. Would you like to have a wellness screening done today? Yes No

11. AHDC may recommend the following vaccines based on your pet's lifestyle. Please circle the vaccines you are interested in or know your pet is due for. After reviewing your record, the veterinarian will discuss a personalized vaccine plan for your pet.

RABIES – Required by state law and to attend Canine Clubhouse.

FVRCP (Feline Distemper) – Strongly recommended for every cat and protects your pet against the following contagious and potentially fatal diseases: Feline Viral Rhinotracheitis, Calicivirus, Panleukopenia

12. Would you like to be contacted by the veterinarian before any vaccines or services that you listed above are provided today? Yes No

13. If you would like to be contacted, what is the best number to reach you? (If we cannot reach you, no services or treatments will be provided for your pet). _(_____)_____ - _____

Animal Hospital of Dauphin County Cancellation Policy:

No shows or cancellations without 48 hour notice will still be billed for the clubhouse call fee and will no longer be eligible for clubhouse calls. Some exceptions may be made by AHDC management if there are extenuating circumstances.

By signing below, I give permission to Animal Hospital of Dauphin County to examine my pet and agree to the cancellation policy above.

X _____