

CANINE INFORMATION AND CONSENT FORM

Date _____ Animal name _____
Caretaker name _____ Approximate age _____ male female
Address _____ Breed _____
City _____ State _____ ZIP _____ Color/markings _____
COUNTY of residence: _____ How did you hear about POP-NC? _____

PHONE NUMBERS TO REACH YOU TODAY (in case of emergency) _____

Spay \$95

Neuter \$95

Animals weighing over 60 pounds are an **additional \$15**. There will be an extra fee for being in heat, pregnancy, umbilical hernia repair, or undescended testicles.

Pain medicine to take home \$5 **highly recommended**

ADDITIONAL SERVICES: PLEASE CHECK THOSE DESIRED

DA2PP Vaccine

\$5 or included w/surgery fee

Rabies Vaccine 1yr / 3yr

\$5 or included w/surgery fee

Heartworm test

\$25 recommended for all dogs whose status is unknown

Heartworm prevention (test required)

\$25 / 30 / 35 six month supply

1-25lbs 26-50lbs 51-100lbs

Note: puppies under 7 months of age can receive heartworm prevention without a test

Microchip (permanent identification)

\$25

Advantage II for fleas

\$40 (small - med) or \$45 (large - xlarge) for 4 month supply

Fecal exam for parasites

\$20

Deworming

\$15

Bordetella (kennel cough) Vaccine

\$15

Other _____

PATIENT INFORMATION

Has your dog ever been to a vet before? yes no

When did your dog last eat? _____

In the last week, has your dog had:
Or changes in: coughing sneezing vomiting diarrhea
 activity level appetite water consumption
Explain _____

Has your dog ever seized? yes no Explain _____

Any known vaccine or medicine reactions? yes no Explain _____

Any history of: health problems injuries or surgeries (hit by car, etc)
Explain _____

What medication has your dog had in the last month- and why? _____

In the last 10 days has your dog been treated for fleas, ticks, or mange (dip, spray, topical, shampoo, powder)?
 yes no What product was used? _____

Is your dog on heartworm prevention? yes no
Type _____ Last test date _____ Result if known _____

WE ACCEPT CASH ONLY. Payment is expected at drop-off. Animals will be released only to the person signing below unless prior arrangements are made.

By signing below, I state that I understand that although every effort will be made to ensure the safety of my pet today, unrecognized medical problems may exist which can cause serious problems, including death.

Caretaker signature _____

Date _____