



Peninsula Avenue Veterinary Clinic

"Drop Off" Form.

Date: _____ Client: _____ Pet: _____ Wt: _____ Age: _____

We have arranged for you to leave your pet here, to allow the Dr. to examine your pet as soon as possible today. Please read through the following questions, and answer any that may apply to your pet today. The more thorough and accurate you are (eg frequency and description), the better for your pet. Please read and sign the authorization on this form.

-The problem(s) is/are _____ and the dates each started _____

-My pet is lethargic Y / N . Describe _____

-Water intake has.....Increased / Decreased / Unchanged. Significantly? _____

-Appetite is Increased/ Decreased. Describe _____

-Vomiting? Y / N. Describe _____

-When seen last stools? _____ Normal? Runny? _____

-What kind of food do you feed? _____

-Consumed anything other than pet food recently? _____

-Any weight gain or loss? Describe _____

-Any Coughing or Gagging? Describe _____

-Any Sneezing? Runny eyes or nose? Describe _____

-Any limping or soreness or injury? Describe _____

-Any lumps anywhere? Changing in appearance or growing? Describe location and any changes. _____

-Any itching or skin problems? Describe _____

-Last vaccines how long ago? _____

-On Flea control and heartworm prevention and products used? _____

-Live with any other pets? Describe _____

-If cat, goes outside at all? _____

I am the owner/agent for described animal, authorize, and request an exam for my pet. I understand that a hospitalization fee will be charged based on how long my pet is in the hospital. I understand the Dr. will contact me after my pet has been examined to discuss recommended diagnostics and treatment, and will have an initial estimate of charges. I can be reached at _____. If I cannot be reached at this number, the Dr. may start treatment if it is deemed dangerous to delay. I understand, and accept that when anesthesia is involved, there are always inherent risks, including death. I understand payment is due when my pet is discharged, however, a deposit may be required after an estimate is prepared and discussed. I accept financial responsibility for charges incurred and will pick up before we close for the day.

Signature: _____ Date: _____