



# QUAKERTOWN VETERINARY CLINIC

## Tri-County Emergency Service

2250 N. Old Bethlehem Pike \* Quakertown, PA 18951

T - 215.536.6245 \* F - 215-536-0226

### Hospital Boarding Medication & Feeding Form

In order to provide the best quality care for your pet while visiting with us, please complete the following questions. If more than one pet will be in Hospital Boarding, complete a form for each pet. Call our office prior to your pet's stay for any medication refills. Our goal is to make your pet's stay comfortable. We suggest you bring treats and toys. However, we ask that you **NOT** bring bedding, stuffed animals or pillows. Please bring this completed form with you for your scheduled Hospital Boarding appointment.

Name:

Address:

Pet's Name:

Hospital Boarding appointment      Date & Time:

List all medical conditions:

<u>Name of Medication</u>	<u>Medication Dose</u>	<u>Medication Dosing</u>	<u>Medical Condition</u>
Example: <i>Thyroxine 0.8mg</i>	<i>1/2 Tablet</i>	<i>6am &amp; 6pm</i>	<i>Hypothyroidism</i>

<u>Type of Food</u>	<u>Amount of Food</u>	<u>Feeding Times</u>
Example: <i>c/d dry &amp; c/d wet</i>	<i>1/2 cup 2x's daily</i>	<i>6am &amp; 6pm</i>

Special/Additional Instructions: