

Specialized Care Intake Form

Please only fill this form out if your dog is being boarded in our Boca Bungalow, or requires medication.

What is the reason your pet is boarding in Specialized Care?

What medication(s) does your pet require?

What are the dosing instructions of the above medication(s), and what schedule do you follow at home? Please note if medication(s) should be given with a meal, prior to a meal, after a meal, or on an empty stomach.

How do you administer your pet's oral medications (pill pockets, peanut butter, pet piller, etc) and is there anything that the staff at Wag Central needs to be aware of (nipping when pilling pet, etc)? If your pet takes their medication(s) in a treat, please bring the treat(s) with you for their stay.

Are your pet's injectable medications administered subcutaneously or intramuscularly?

What is the schedule you follow at home for feeding? Please note that if you are bringing food from home, all meals must be pre-packaged in ziploc bags. If your pet is diabetic, you MUST bring your pet's food from home.

What is the schedule you follow at home for potty breaks? Please note the time of the first and last potty break each day.

Is there anything else the staff at Wag Central should be aware of? For example, pet's stool tends to be loose, pet drinks excessively, pet has trouble walking, pet is sensitive in certain areas of their body, etc.

If applicable, is your pet comfortable being picked up?

Do you want your dog to socialize with other dogs with similar play styles/temperaments while they board?

If so, has your pet been in a daycare and/or park setting before?

Is there anything additional that you feel the staff at Wag Central should be aware of to help make your pet's stay as stress free as possible?

I understand that, while the staff at Wag Central will do their best to mimic the normal routine of my pet during their stay, it is impossible to exactly replicate a pet's home environment. Being away from home can cause added stress which can exacerbate certain medical conditions including but not limited to epilepsy and diabetes. I understand that if there is a medical issue with my pet, the staff at Wag Central will do their best to contact me prior to seeking veterinary care for him or her; However, if I cannot be reached, or in the case of an emergency, I understand that the staff at Wag Central may deem it necessary for my pet to receive veterinary care and will take him or her to Wag Central's veterinary partner or to the nearest emergency hospital at my expense.

Owner's Signature: _____ Date: _____

For pets with diabetes:

I give permission to the staff at Wag Central to check my pet's blood glucose at anytime during my pet's stay if my pet is showing symptoms of either hyperglycemia or hypoglycemia. I understand that a charge of \$30 per blood glucose reading will be added to my bill to be paid upon my return.

Owner's Initials: _____