



Wellness Clinic

OWNERS: PLEASE FILL OUT TOP SECTION

Date: _____ Pet Name: _____ Owner Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email: _____

Pet Age/DOB: _____ Breed: _____ Color: _____

Please Circle: CAT / DOG MALE / FEMALE / SPAYED FEMALE / NEUTERED MALE

Was this pet adopted from EAS? YES NO

Does your pet have any known allergies and/or history of vaccine reactions? _____

PLEASE DO NOT WRITE BELOW THIS LINE

SERVICES NEEDED

CANINE

- EAS Adoptee Rabies
- 1yr Rabies (\$11)
- 3yr Rabies (\$25)
- DA2PP (\$17)
- Bordetella (\$17)
- Heartworm Test (\$26)
- Nexgard Exam (\$10)
- Online Rx Fill Fee (\$20)

FELINE

- EAS Adoptee Rabies
- 1yr Purevax Rabies (\$22)
- FVRCP (\$17)
- FeLV / FIV Test (\$33)
- Online Rx Fill Fee (\$20)

MISCELLANEOUS

- Nail Trim (\$5)
- Microchip (\$25)
- Anal Gland Express (\$15)
- Fecal Float (\$16)

Deworm Canine/Feline:

Pyrantel: _____ Panacur: _____ Droncit: _____ Profender: Teal (sm) Orange (md) Purple (lg)

WEIGHT: _____ TEMP: _____ HWT: NEG / POS FeLV: NEG / POS FIV: NEG / POS

FECAL: NEG / POS: _____

GENERAL APPEARANCE: N/Ab SKIN: N/Ab EARS: N/Ab DENTAL: N/Ab

DR. NOTES: _____

CANINES WITH HEARTWORM TEST: _____ HEARTWORM PREVENTION REQUESTED, SEE RX BELOW

_____ HEARTWORM PREVENTION DECLINED BY CLIENT

ONLINE RX MEDICATION REQUESTED: _____

Rx: () HG QTY _____ () NG QTY _____ () ONLINE DURATION _____