PetsHotel®

Medication Form

Pet's Name: _____ **Last Name:** _____

Pet Parent (signature): _____ **Date:** _____

Is your pet allergic to any food (human or pet)? ☐ Yes ☐ No

If yes, what? _____

Medication Name				Verified medication as acceptable: Associate Initials:
For what condition/ailment is the pet being treated?				
Is there any special way that you give your pet medication?				
Verify type of medication – count of prescription meds only	☐ Ointment Count:	☐ Oral Count:	☐ Other - Specify: Count:	
Is this medication to be administered regularly or on an "as needed" basis?	☐ Regularly scheduled	☐ AM Amount:	☐ Noon Amount:	☐ PM Amount:
	As Needed	If you selected 'As Needed" – specify the maximum daily dosage/frequency?		

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Is there any special way that you give your pet medication?				
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	As Needed	If you selected 'As Needed" – specify the maximum daily dosage/frequency?		

Medication Name				Verified medication as acceptable: Associate Initials:
For what condition/ailment is the pet being treated?				
Is there any special way that you give your pet medication?				
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Is this medication to be administered regularly or on an "as needed" basis?	☐ Regularly scheduled	☐ AM Amount:	☐ Noon Amount:	☐ PM Amount:
	As Needed	If you selected 'As Needed" – specify the maximum daily dosage/frequency?		

MEDICATION CALENDAR

To be completed by PetsHotel Leader or Lead. Indicate the check-in and check-out time in the "Notes" section below. Mark "NA" in each applicable time slot where the pet did not receive medication (at the scheduled time to be administered or assessed) due to check-in and/or check-out times. Include the **exact time** the medication was administered and the initials of the person administering it under AM/Noon/PM. Pets receiving medications "As Needed" must be evaluated at a minimum of three times daily (AM/Noon/PM) - confirm that the maximum daily dosage/frequency has not been exceeded prior to medicating.

Pet's Name:

Bin Number:	Room Number:	Check-In Date:	Check-Out Date:	Leader/Lead Initials:

Month	Date	Med(s)	AM	Noon	PM	Notes