

Westbridge Veterinary Hospital
Drop-Off Appointments



If you would like to drop off your pet for the day, to be seen by a doctor while you are at work, please call the hospital or email us to arrange for this service. Then fill out this form and bring it with you at your drop-off time. If your pet has not been here before, please also fill in our new client form.

Your name: _____

Your pet's name: _____

Reason for your visit today:

- annual health exam and vaccines ____
- annual bloodwork (wellness, heartworm test, senior testing) ____

- recheck of previously seen problem - please provide details:
 - what is the problem? _____
 - when did we first see your pet for this condition? _____
 - has there been any improvement or worsening? _____

- new problem - please provide details:
 - what is the problem? _____
 - when was it first noted? _____
 - has anything been done for it? _____

- when did your pet last eat? _____

- is he/she on any medications or supplements? _____

- have you noticed any vomiting, diarrhea, coughing? _____

Your pet will be examined by a veterinarian, who will then contact you to discuss what diagnostic tests and/or treatments are required.

Please provide a phone number where you can be reached during the day: _____

I hereby authorize the following procedures to be performed before notifying me:

- | | |
|-----------------------------|------------------|
| physical exam ____ | vaccination ____ |
| bloodwork ____ | urinalysis ____ |
| x-ray ____ | ultrasound ____ |
| fecal exam ____ | cytology ____ |
| sedation (if required) ____ | other ____ |

Signature _____