



Pet's Name:
Soffee

Owner's name HPVC

Pet Arrival Date: Discharge Date: Requirements Met: Y / N Checked in by: Capstar:

Medications & Diet:

(1)DIET 1/4 cup HP dry twice daily

Lean treat small amount to give pills ok to use

2) Pred 5mg 1/2 tablet in the evening every other day.

3)Adequan 0.29mL SQ on the 4th Thursday of each month in the morning.Starting 01/20/2022for maintance

4) Felimazole 2.5mg one tablet in the morning and one tablet in the evening .

5) Gabapentin 50mg one in the morning and one in the evening.

Bath / Groom / Pedicure Bath or Groom Date: Other Services:

2022

Date	Time	Food Offered	Food Eaten	Urine	BM	Play Time	Comments/Medication
6/2	EARLY						
	AM						
	NOON						
	PM						
	NIGHT						

Date	Time	Food Offered	Food Eaten	Urine	BM	Play Time	Comments/Medication
6/3	EARLY						
	AM						
	NOON						
	PM						
	NIGHT						Get weight

Date	Time	Food Offered	Food Eaten	Urine	BM	Play Time	Comments/Medication
6/4	EARLY						
	AM						
	NOON						
	PM						
	NIGHT						

Date	Time	Food Offered	Food Eaten	Urine	BM	Play Time	Comments/Medication
6/5	EARLY						
	AM						
	NOON						
	PM						
	NIGHT						

Treatment/Medication:	Quantity:	Frequency:	AM	NOON	PM	AM	NOON	PM	AM	NOON	PM	AM	NOON	PM	Verifying Nurse Initials
Prednisolone, 5 mg	1/2	EOD PM													
gabapentin 50mg	1	twice daily													
Adequan Thursday	0.29mL	1x monthly													
Felimazole 2.5mg	1	twice daily													
Date:			6/2			6/3			6/4			6/5			

I have verified the charges and they are correct on this sheet and correct on the owner's account: _____