

# Boarding Wellness Exam

The Inn at Old Derby  
40 Recreation Park Drive  
Phone 781-749-2800

Old Derby Animal Hospital  
Hingham, MA 02043  
Fax 781-741-5051

Client's name: \_\_\_\_\_

Pet's name: \_\_\_\_\_ Breed: \_\_\_\_\_

When will this pet be checking out? \_\_\_\_\_

Please provide the doctor with your e-mail so that they can send a written report of the exam findings:

**E-mail:** \_\_\_\_\_ **Whose e-mail is this?** \_\_\_\_\_

If you do not have e-mail, please provide a phone number to contact you.

**Phone:** \_\_\_\_\_ **Whose number is this?** \_\_\_\_\_

Does your pet have any food or medication allergies? **No** **Yes**  
If yes, please list: \_\_\_\_\_

What type of heartworm and internal parasite prevention do you use? \_\_\_\_\_  
All year long? **Yes** **No** If no, explain use: \_\_\_\_\_

What type of flea/tick prevention do you use? \_\_\_\_\_  
All year long? **Yes** **No** If no, explain use: \_\_\_\_\_

Describe pet's regular diet.

Brand name and type of food:	Amount fed:	How Often:
_____	_____	_____

Do you give your pet any medications or supplements?

Brand name and type of medication:	Amount given:	How often:
_____	_____	_____

Has your pet had any vomiting, diarrhea, coughing, limping or lameness?

**No** **Yes** If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there anything else you would like the doctor to know about or have a look at?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you like us to?

\_\_\_ Treat your pet after examination

\_\_\_ Contact you with the findings of the examination and an estimate of treatment cost prior to treating your pet.

**Please be sure we are able to contact you if you choose this option.**

In admitting my pet for diagnostics, treatment or surgery, I authorize the veterinarians of Old Derby Animal Hospital and their support staff, to administer such treatment and/or perform such diagnostic or surgical procedures as deemed necessary.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

If you have not heard the results of this exam within 48 hours of returning home, please contact us at **781-749-2800**.