



6118 Countryside Avenue

Cheyenne, Wyoming 82001

307-204-4461 - info@prairiehillsvet.com

Guest Name:   
Owner Name:   
Guest Check-in Date:

### Pet Hotel Guest Medication/Supplement List and Instructions

*Please note: all medications must arrive to us in their original bottles with original labels printed by your veterinarian. All supplements must be provided in their original packaging/bottles with clear dosing instructions. Please ensure that you provide a sufficient quantity of each medication to last your pet throughout his or her hotel stay. If able, Prairie Hills Animal Hospital can provide additional medications if needed at an additional cost. If your pet is not a patient of Prairie Hills Animal Hospital, an exam will need to be performed by one of our veterinarians to establish a valid veterinary-client-patient relationship before the medications can be dispensed. Please note that Prairie Hills's pharmacy is not comprehensive, and we cannot guarantee the ability to replace medication in the event that not enough was provided.*

*There will be an extra \$10.00 medication/supplement administration fee per guest, per day for 1-2 medications.*

*There will be an extra \$15.00 medication/supplement administration fee per guest, per day for 3+ medications.*

**My pet is not currently on any medications and will not be needing any dispensed during their boarding stay.**

1. Medication name:   
Why is your pet on this medication:   
How often does your pet get this medication:   
What time(s) does your pet normally receive this medication:   
Does this medication need to be given with food?  Yes  No  
Does this medication need to be given while fasted?  Yes  No  
\*How does your pet take this medication (ie in food, in a treat, must be pill, etc):   
What was the date and time of your pet's last dose of this medication:   
When is your pet due for his or her next dose of this medication:

2. Medication name:

Why is your pet on this medication:

How often does your pet get this medication:

What time(s) does your pet normally receive this medication:

Does this medication need to be given with food?  Yes  No

Does this medication need to be given while fasted?  Yes  No

\*How does your pet take this medication (ie in food, in a treat, must be pill, etc):

What was the date and time of your pet's last dose of this medication:

When is your pet due for his or her next dose of this medication:

3. Medication name:

Why is your pet on this medication:

How often does your pet get this medication:

What time(s) does your pet normally receive this medication:

Does this medication need to be given with food?  Yes  No

Does this medication need to be given while fasted?  Yes  No

\*How does your pet take this medication (ie in food, in a treat, must be pill, etc):

What was the date and time of your pet's last dose of this medication:

When is your pet due for his or her next dose of this medication:

***\*If your pet requires specific treats or food for medication administration, please bring these with you. Pill Pockets can be provided by Prairie Hills at an additional cost.***

*I hereby confirm that all information I have provided regarding my dog's medications, including the names, dosages, frequencies, and purposes, is complete, accurate, and up to date to the best of my knowledge. I understand that providing incorrect or incomplete information could affect the health and safety of my dog and release the receiving party from liability related to such inaccuracies. I agree to promptly notify Prairie Hills of any changes to my dog's medication regimen.*

**Signature:**