



Curbside Appointments in response to COVID-19

Due to the concerns of COVID-19, our hospital has modified our protocols to keep the safety of both our clients and staff in mind. We are no longer having clients come into the facility in order to practice social distancing appropriately. Our goal is to stay healthy so we may continue to serve our community and the pets they love!

Once you arrive for your appointment, please call our office from your car at (772)288-3456. A staff member will facilitate your appointment and answer any questions you may have on the process. Please be sure to complete this form completely prior to your appointment to ensure a smooth process. As always, an estimate can be provided for any services.

A staff member will bring your pet into the clinic where the doctor will review your appointment form and examine your pet. **Please have your cellphone handy so the doctor can communicate with you during or immediately after the exam.**

We would prefer to take credit card payments over the phone after the exam to limit contact as much as possible. We will not be accepting cash payments at this time.

Thank you for your patience and understanding. These are crazy times, but we will get through this together!

Please answer the following questions completely:

Pet Name:

Date of your pet's appointment:

Client Name (First and last):

Mobile Phone Number (can be reached when you are here):

Any Address Changes:

Email Address:

What is the reason for today's visit?

Patient Information

Is your pet currently on any medications? (Please include flea and heartworm prevention)

When was the last time medications listed above were given?

Are you concerned with your pet's eating or drinking habits? Yes No

What does your pet eat? (Please provide formula, wet/dry, how much, and frequency. Does your pet get table scraps?)

Any concerns with your pet's urine output or bowel movements? If so, please describe.

Are there any symptoms you are concerned with? (Examples: Coughing, sneezing, vomiting, lethargic, eye discharge.) If so, please include duration of symptoms and describe.

Do you need any prescriptions refilled during the visit? Yes No

Are there any other services you would like done during today's visit? (Example: nail trim, anal sac expression)

If your pet is overdue for vaccines, are you interested in having them updated? (If your pet is ill, the doctor may not recommend vaccines) Yes No

Anything else you would like us to know?