



### MEDICATION AND SUPPLEMENTATION INSTRUCTIONS

PAW COMMONS USE:

CSR: \_\_\_\_\_

Pet Tech: \_\_\_\_\_

Dog's Name (First/Last): \_\_\_\_\_ Prescribing Vet Clinic: \_\_\_\_\_

Dog Owner's Signature: \_\_\_\_\_ How Can We Reach You? \_\_\_\_\_

**Name of Medication:** \_\_\_\_\_ **Why Prescribed?** \_\_\_\_\_

Dosage	How Often (circle all that apply)	How to Administer preferred method (circle)	First Date/Time We Administer	Last Date/Time We Administer
	Morning Afternoon Evening Other _____	Wet food "Meatball" Sprinkle on food Peanut butter 'Meatball' Manually "Pill" dog Other _____		

**Refrigerate? Yes / No      Pre-mixed in food by you? Yes / No      Do We cut pills? Yes / No**

Additional Instructions/Notes: \_\_\_\_\_

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**Refrigerate? Yes / No      Pre-mixed in food by you? Yes / No      Do We cut pills? Yes / No**

Additional Instructions/Notes: \_\_\_\_\_

- PLEASE USE THE BACK OF THIS FORM FOR ADDITIONAL INFORMATION
- IF A DOG IS RECEIVING MORE THAN 3 MEDICATIONS, PLEASE USE ADDITIONAL FORMS
- IMPORTANT: WE DISBURSE MEDICATION BASED ON YOUR WRITTEN INSTRUCTIONS, NOT BASED ON THE LABELS ON THE BOTTLES