

* Additional Signs to Add? No Yes:

<p>Have you heard your cat sneezing in the last two weeks? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has your cat had any vomiting or diarrhea in the last 2 weeks? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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Brand of food fed at home:
Quantity at check in:

Cat Examination Form

Cat's Name: _____ Suite Number: _____ Weight: _____

Eyes	<input type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Crusty <input type="checkbox"/> Red <input type="checkbox"/> Drainage		
Ears	<input type="checkbox"/> Normal <input type="checkbox"/> Need Cleaning <input type="checkbox"/> Possible Infection		
Coat	<input type="checkbox"/> Normal <input type="checkbox"/> Thin <input type="checkbox"/> Dry <input type="checkbox"/> Oily <input type="checkbox"/> Needs a bath? <input type="checkbox"/> Matted: _____ <input type="checkbox"/> Hotspots: _____		
Indoor / Outdoor	Does Your Cat Go Outdoors? <input type="checkbox"/> No <input type="checkbox"/> Yes	Is your cat on flea & tick prevention? <input type="checkbox"/> No <input type="checkbox"/> Yes, Brand: _____	
Nose / Teeth / Gums	Nose: <input type="checkbox"/> Normal <input type="checkbox"/> Drainage <input type="checkbox"/> Crusty	Teeth: <input type="checkbox"/> Normal <input type="checkbox"/> Need dental?	Gums: <input type="checkbox"/> Normal <input type="checkbox"/> Sore/Bleeding
Paw Pads / Nails	Pads: <input type="checkbox"/> Normal <input type="checkbox"/> Dry <input type="checkbox"/> Cracked <input type="checkbox"/> Irritated	Nails: <input type="checkbox"/> Front Declawed <input type="checkbox"/> All Declawed <input type="checkbox"/> Needs Nail Trim	
Hips & Joints	<input type="checkbox"/> None		
Abrasions	<input type="checkbox"/> None		
Lumps	<input type="checkbox"/> None		
Major Medical Problems	<input type="checkbox"/> None		
Current Medications / Supplements	<input type="checkbox"/> None		
Allergies	<input type="checkbox"/> Skin <input type="checkbox"/> Seasonal: _____ <input type="checkbox"/> Food: _____ <input type="checkbox"/> None		

If your cat is finicky in their eating habits, may we supplement their diet with any of the following? (\$2 Administration Per Meal)
 Canned Food Chicken Chicken Broth Tuna Any of these Other: _____ No

May we feed your cat house food if their food runs out? Yes No

Some cats exhibit symptoms of stress while boarding. If your cat should become stressed we have an all-natural herbal remedy called Happy Traveler. May we give this to your cat? Yes No

If your cat should develop any digestive upset or diarrhea while boarding, we have a supplement called Endosorb that relieves the irritation and discomfort associated with diarrhea. May we give this to your cat? Yes No

Owner's Signature: _____ Date: _____

Examiner's Signature: _____ Date: _____