



Monte Vista Pet Lodge Significant Medical Conditions Form

Owners Name:

Date:

Pets Name:

Monte Vista Pet Lodge is a well and special needs boarding facility and is not equipped to provide veterinary care if diagnostics or treatment are needed. This form is for our special needs lodgers who are considered to have a significant medical conditions. These conditions include but are not limited to;

Cardiac (Heart) Disease	Hepatic (Liver) Disease	Renal (Kidney) Disease
Diabetes	Neoplasia (Cancer)	Immunocompromisation
IVDD or Herniated Disc	Seizures	Neurological Disorders
Geriatric or on Palliative Care: Small Breed and Cats: 12+ yrs Med and Large Breeds: 9+ yrs		

These disease processes while often managed well with medication, can change rapidly and without explanation. The staff of Monte Vista Pet Lodge are trained to provide medications as directed and to recognize general symptoms of these diseases should changes in your pet's physiology occur. However, if in the chance a change in your pet's condition is noted they are not available to provide immediate medical care or diagnostics. In the event your pet does have a medical emergency every attempt will be made to contact you or your emergency contact. Your pet will be transferred to either Zia Pet Hospital or Roadrunner Veterinary Emergency & Specialty Hospital for care pending availability.

Please indicate which medical condition your pet is currently managing

Is your pets condition currently under medical management by your rDVM? ☐ Yes ☐ No

Have you discussed if your pet is healthy enough for lodging, daycare or grooming services with your rDVM? ☐ Yes ☐ No

In the extreme case of a life-threatening emergency, and you cannot be immediately contacted, you authorize MVPL staff to have the following preformed **(Please initial one):**

_____ Perform any interventions deemed necessary, including but not limited to CPR.

_____ Do not perform resuscitative efforts (DNR)

By signing this document, I acknowledge that I have provided accurate information in regards to my pet's care during their time at Monte Vista Pet Lodge. I acknowledge that this form and information within will remain in effect until which point I notify MVPL staff of changes.

Owner Signature:

Date:

Witness Signature:

Date: