



**Consent Form for Diabetic Condo Admission**

**Client name:** \_\_\_\_\_ **Pet's name:** \_\_\_\_\_

**Check In Date:** \_\_\_\_\_ **Check Out Date:** \_\_\_\_\_

**For your pet's protection, all vaccines must be current.** If not, vaccines will be done, and fees will be applied. Please provide proof of vaccination if not administered at the Victoria Veterinary Clinic.

After carefully reading our policies, please fill out the diabetic boarding form. If your pet has been diagnosed with diabetes and is currently receiving insulin injections, then your pet requires special care from our boarding team. These are the most common concerns we face when boarding a pet with diabetes:

- Boarding can be stressful and result in increased glucose levels
- Some cats eat very little or at times refuse to eat their meal altogether
- Diabetic cats that begin vomiting while boarding
- Increased urine output (beyond what is expected from diabetic patients)

In order to properly care for your diabetic pet, we include the following in every boarding stay; in addition to the routine boarding care with measured food and water intake, three time a day maid service, Insulin given twice a day, and alternative foods to promote interest in eating if necessary.

Cost is \$43.85 + tax per day.

Our team is instructed on the proper care of diabetics but if he/she is not eating full meals they will be examined (see additional cost) and treated as necessary (at the owner's expense) and insulin dosage may be adjusted daily by in consultation with a Doctor

\_\_\_\_\_Initial

**Added cost of diabetic boarding IF NEEDED**

Medications /Raw Diet	IF NEEDED	\$4.90 per day/ Rate for one cat
Examine	IF NEEDED	\$94.00
Blood Glucose test	IF NEEDED	\$18.60 per check
Urine test	IF NEEDED	\$79.50

**Food:**

*AM:* Dry Food. Amount: \_\_\_\_\_  
 Wet Food. Amount: \_\_\_\_\_  
*PM:* Dry Food. Amount: \_\_\_\_\_  
 Wet Food. Amount: \_\_\_\_\_

**My pet:**

- Always finishes his/her food
- Eats 1/2 to 3/4 of food
- Eats lightly
- Other: \_\_\_\_\_

**Water Consumption:**

High  Normal  Low

**Urine Volume:**

High  Normal  Low

\*\*If food runs out, we will select the appropriate replacement and add to invoice.

Special Instructions: \_\_\_\_\_  
\_\_\_\_\_

**Insulin:**

Type of insulin: \_\_\_\_\_  
AM unit amount: \_\_\_\_\_ Time: \_\_\_\_\_  
PM unit amount: \_\_\_\_\_ Time: \_\_\_\_\_  
Last given: \_\_\_\_\_

**Other Medication Schedule:**

	Amount Given AM	Amount Given PM	Last Given
1)			
2)			
3)			

When was your pet last tested to determine blood-glucose levels? \_\_\_\_\_  
Any recent vomiting or diarrhea? \_\_\_\_\_  
How is your pet's appetite in response to stress? \_\_\_\_\_  
Any other health issues? \_\_\_\_\_  
Articles that you brought: \_\_\_\_\_  
\_\_\_\_\_

**Additional Options**

- Pedicure \$13.90 per cat Rate for one cat
- Pedicure with Soft Paws (Soft paws sold separately) \$31.00 per cat Rate for one cat
- Feliway diffuser placed in condo to provide your cat with extra calming comfort. \$2.40 per day

Please provide a contact person(s) in case of an emergency or any questions regarding your pet while boarding. This can be yourself, a friend or family member.

**Contact Person**

Name: \_\_\_\_\_  
Phone Number(s) \_\_\_\_\_ Call or Text (circle one)  
Email \_\_\_\_\_

**Contact Person #2**

Name: \_\_\_\_\_  
Phone Number(s) \_\_\_\_\_ Call or Text (circle one)  
Email \_\_\_\_\_

Provide the name of person picking up or coming to visit your pet if other than yourself \_\_\_\_\_