WESTIE RESCUE MICHIGAN, INC.
MEDICAL CARE CHECKLIST
WITHOUT EXPLANATIONS

Date

____ 1. FLEA CHECK
____ 2. BATH/GROOM
____ 3. EMAIL GROUP
____ 4. TAKE MEDICAL RECORDS TO VET
____ 5. MAKE VET APPTS IMMEDIATELY (INCL. DENTAL & SPAY/NEUTER)
____ 6. SHOTS/Boosters as needed
____ a. RABIES
____ b. DHLP (be sure lepto is included in this shot)
____ c. BORDETELLA
____ d. LYME (and booster)
____ 7. HEALTH CERTIFICATE
____ 8. FECAL CHECK
____ 9. HEARTWORM TEST
____ 10. HEARTWORM PREVENTION
____ 11. MICROCHIP (See registration notes on full checklist)
____ 12. SPAY/NEUTER
____ 13. SPAY/NEUTER CERTIFICATE
____ 14. DENTAL
____ 15. CHECK OUT OTHER ISSUES
____ 16. BLOOD PANEL
____ a. COPY OF BLOOD PANEL FOR FILES AND ADOPTER
____ 17. THYROID PANEL IF INDICATED
____ 18. DISCUSS EXTRA SURGURIES/TREATMENTS AS NEEDED

August 2016