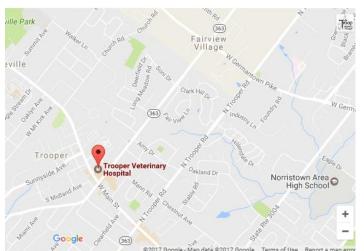


# oper Welcome to Trooper Veterinary Hospital!

#### New Client and Patient Form & Medical Records

In preparation for your upcoming appointment, please complete the attached form entirely and return it to us via fax 610-539-4851 or e-mail <a href="mailto:info@troopervet.com">info@troopervet.com</a> at least 24 hours prior to your appointment.

In order to best determine your pet's needs, it is important for us to have all previous medical records. Please make sure to have the records faxed to 610-539-4851 or e-mailed to info@troopervet.com at least 24 hours prior to your pet's appointment.



#### Address & Directions

Our address is 7 North Park Avenue, Norristown, PA 19403. We are located at the corner of Route 363 (North Park Avenue) and Ridge Pike (West Main Street) right behind the Walgreens. WE ARE NOT on Trooper Road. Please note:Traffic can be extremely heavy around our hospital during normal rush hours.

If you are unfamiliar with where we are located, please visit our website <a href="http://www.troopervet.com/directions">http://www.troopervet.com/directions</a> to find an interactive map.

Please plan to arrive 15 minutes early for your first appointment

### Reminder List for Appointment

- Return completed New Client & Patient Form to Trooper Veterinary Hospital 24 hours ahead. Call us if you are unable to do this and we can take your information over the phone.
- □ Pet's previous medical records provided 24 hours in advance of your appointment or provide the information we need to get it for you.
- ☐ Fecal Sample (for 1<sup>st</sup> puppy/kitten visit and for annual checkup)
- ☐ Bring any medications your pet is on (if applicable)
- ☐ Write down the name of the food you are feeding (or take a picture with your phone)
- Directions to Trooper Veterinary Hospital

### Misc. Hospital Information

- For your convenience, we have separate entrances for our cat and dog patients
- Please have your pet under proper restraint when entering or leaving the hospital
- Please make sure to check-in at the front desk when you arrive
- Please follow all Covid safety measures as noted on our entrance doors.
- Dog elimination area is located across the parking lot from the hospital.

Trooper Veterinary Hospital is a healing environment. Our team is working in harmony to provide exceptional care. We will do our best to provide the best possible animal care and customer service, even while sometimes facing staffing shortages. We have zero tolerance for disrespectful, aggressive or demeaning language or behavior and will not provide services in these situations.

We look forward to meeting you and your pet and developing a long lasting professional relationship!

Please don't hesitate to contact us if you have ANY questions.

## NEW CLIENT & PATIENT INFORMATION SHEET \*\*\*Please complete entire form \*\*\*

OWNER INFORMATION		
OWNER'S FULL NAME		
SPOUSE / CO-OWNER'S FULL NAME		
STREET ADDRESS		
CITY		
1st Phone & First Name		Cell-Home-Work?
2 <sup>nd</sup> Phone & First Name		Cell-Home-Work?
3 <sup>rd</sup> Phone & First Name		Cell-Home-Work?
E-mail (1 per account)		
Pictures of your pet may be taken for your pet's medical records. You may consent to allow Trooper Veterinary Hospital to use		
pictures outside of your pet's medical records.  IMAGE CONSENT (optional)		
I agree to allow Trooper Veterinary Hospital to share my pet(s), myself or my family images, as instructed, on Trooper Veterinary Hospital's social medial platforms (Facebook, Instragram).		
PET INFORMATION		
PET NAME	DOG CAT OTHER-	-SPECIFY
BREED	COLORS / MARKINGS	
FEMALE SPAYED FEMALE MALE_	NEUTERED MALE	UNKNOWN
DATE OF BIRTH or ESTIMATED AGE IS YOUR PET MICROCHIPPED? Yes / No / Unknown		
PREVIOUS OR CURRENT VETERINARY HOSPITAL(S):		
PHONE #		
ANY KNOWN MEDICAL CONDITIONS?		
CURRENT MEDICATIONS		
PLEASE LET US KNOW IF YOU HAVE PET INSURANCE – WE CAN SUBMIT CLAIMS FOR YOU!		
Please let us know how you first heard about Trooper Veterinary Hospital. PLEASE CHOOSE ONE:		
SIGN OR DRIVE BY INTERNET / WEBSITE / FACEBOOK AAHA		
TROOPER VET EMPLOYEE?		
ONE OF OUR CLIENTS?	OTHER	
Payment in full is required at time of service. We cannot bill you or carry balances. We accept all major credit cards and Care Credit ( <a href="www.CareCredit.com">www.CareCredit.com</a> ). You will be responsible for missed appointment fees A deposit is required for hospitalization, surgery, procedures, diagnostics, lodging, first visits and rescheduled appointments.		
Signature:		Date: