

PSDPC HEALTH DAY SATURDAY, DECEMBER 7

at GOLD STAR DOG SCHOOL 1530 22nd St NW, Suite 103, Auburn



BY APPOINTMENT ONLY

PAYMENTS MUST BE MADE IN ADVANCE Return form to larkin.pl@live.com or by mail by December 1. We will invoice you via PayPal or you may pay by check (payable to PSDPC).

Cardiology: Dr. Jerry Woodfield DVM Veterinary Tech Services: Kim Owen LVT

ONE FORM PER DOG

PLEASE COMPLETE BOTH SIDES OF FORM. QUESTIONS: larkin.pl@live.com

Dog's call name: .			Breed:			
Gender: 🗖 Male	🖵 Female			Preferred time: I try to meet your time prefere		
Owner name(s)						
Email				Phone		

See next page for services.

No same-day appointments. No drop ins. No exceptions.

Clinic is scheduled on receipt of this completed form, first come/first served, at **larkin.pl@live.com** or by US mail. Priority is given to active PSDPC Members, followed by any other (non-club member) Doberman Pinschers, then all other dogs.

Echocardiograms: Limited to 24 dogs. Cardiologist and assistant will hold dogs in the exam room and owners will remain in the waiting area. If the echocardiogram appointments are filled, we will wait list and hold a February 2025 clinic in Granite Falls.

SUBSIDY REQUIREMENT: The PSDPC Board of Directors provides a health day stipend <u>only</u> to active PSDPC members who have provided volunteer hours or donations to the Club. The stipend is applicable to the Echocardiogram (\$100) and the Total Health Plus Profile lab work (\$50). Stipend credits are earned in the calendar year, are determined by the PSDPC Board, maintained by the Treasurer, and are non-transferable. See **Health Day** on our website (<u>psdpc.org/healthday</u>) for more information.

LIABILITY: The PSDPC and its representatives reserve the right to refuse service to any individual who fails to abide by the rules of the event or disrespects, misuses or abuses the event volunteers or the event property. Any dog exhibiting any type of aggressive or overly fearful behavior will be immediately removed. In either case no refunds will be issued.

ECHOCARDIOGRAM EXAM LIMITS: The PSDPC Health Day is intended only as a breed screening and does not include diagnostics or follow-up support. Veterinarian in attendance as well as the veterinary technician will <u>only</u> present you with the results of your screening and/or lab results. Medical opinion or treatment options are not offered at this clinic, services provided at the PSDPC Health Day clinic do no imply any further care to be provided. Follow-up or additional diagnostics must be with your primary veterinarian, your cardiologist or other specialist.

 Signature (required):
 Date:

 SIGNED
 SUBSIDY
 INVOICED
 PAYMENT REC'D
 APPT. TIME:

LAB WORK

TOTAL HEALTH PLUS PROFILE (THPP):	\$185 enter amount >						
HPP bloodwork: comprehensive CBC, Chem 27 and total T4. Includes Cardiopet/ProBNP. Additional options below are separate.							
Optional testing SEPARATE from THPP above	Vaccines and other services						
Cardiopet/ProBnP <u>only</u> : \$125 . enter amount >	DHLPP combo vaccine: \$35enter amount >						
Urinalysis: \$45enter amount >	Rabies vaccine: \$25 enter amount >						
Fecal Panel: \$40enter amount >	Bordetella oral vaccine: \$30enter amount >						
Brucella testing: \$70 enter amount >	Microchip: \$35enter amount >						
Heartworm antigen: \$40 enter amount >	Health Certificate: \$25 enter amount >						
Other testing is available bewayer it must be arranged and confirmed in av	dvanco						

Other testing is available however it **must** be arranged and confirmed in advance.

ECHOCARDIOGRAM

ECHOCARDIOGRAM:		\$225 e	enter amount >				
NEW>> 🗅 Check here if your dog has been at	a previous PSDPC Health Day.	Date:					
Date of recent Holter*:	Cardiology medication(s) if a	pplicable:					
Dog's registered name							
If your dog has NOT had an echocardiogram at a PSDPC Health Day before, you <u>must</u> fill out the the form below. If your dog has been to a PSDPC clinic within two years , you do <u>not</u> need to fill out the remainder of the form.							
Dog's Date of Birth (MM/DD/YY):/	/ W	Veight:	.□kg □lbs □estimate				
ID Number (🗅 microchip 🗅 tattoo 🗅 not avai	ilable):						
Dog's Registration #			🗖 AKC 🗖 Other				
Sire Registration #			🗖 AKC 🗖 Other				
Dam Registration #			🗖 AKC 🗖 Other				

* Please forward Holter report to **bettydog@gmail.com** or bring paperwork with you

TOTAL DUE \$____

□ Please invoice me via PayPal Check enclosed, payabe to PSDPC

PSDPC Subsidy for Active Club Volunteers: Club subsidy is \$100 for echocardiogram and \$50 for THPP. We will apply that to your invoice if you have earned stipend credits as confirmed by the Board / Treasurer. See PSDPC website (psdpc.org/healthday). Total with subsidy \$_____

RETURN BY DECEMBER 1 to Patricia Larkin • larkin.pl@live.com

Mailing address: 724 Hoyt Ave • Everett WA 98201

We will send confirmation, any additional details and schedule via email.