



# Medication Log

Dog's Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's signature indicates that these medication have been prescribed by a licensed Veterinarian to the above named dog and the instructions given by such licensed Veterinarian have not been altered in any way.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Check-in Date:** \_\_\_\_\_

**Check-out Date:** \_\_\_\_\_

**Staff Initials:** \_\_\_\_\_

**Medication 1**

Medication Name:						How many pills/mLs in bottle?:
What is this medication for?:						
Circle Type of Medication:	Pills/Caps	Liquid	Drops	Ointment	Supplements	
Medication Instructions:	AM Dose:		Noon Dose:		PM Dose:	
Is this medication given with food?	Circle: Yes No					
Were medications given by Owner today?	Yes	No	Owner initials:			

Staff Notes:

**Medication 2**

Medication Name:						How many pills/mLs in bottle?:
What is this medication for?:						
Circle Type of Medication:	Pills/Caps	Liquid	Drops	Ointment	Supplements	
Medication Instructions:	AM Dose:		Noon Dose:		PM Dose:	
Is this medication given with food?	Circle: Yes No					
Were medications given by Owner today?	Yes	No	Owner initials:			

Staff Notes:

**Medication 3**

Medication Name:						How many pills/mLs in bottle?:
What is this medication for?:						
Circle Type of Medication:	Pills/Caps	Liquid	Drops	Ointment	Supplements	
Medication Instructions:	AM Dose:		Noon Dose:		PM Dose:	
Is this medication given with food?	Circle: Yes No					
Were medications given by Owner today?	Yes	No	Owner initials:			

Staff Notes: