

The Pet Hospital of Tierrasanta

6030 Santo Road, Ste. A

San Diego, CA 92124

Phone: 858-569-7777 Fax: 858-569-4142

Office Hours: Monday thru Saturday 8am-6pm

SURGERY CHECK-IN SHEET

To allow us to provide the best possible care for your pet,
please fill out this form completely.

Owner's Name: _____ Pet's Name: _____

BEST phone *number* to reach you **TODAY**: (____) _____ - _____

Surgery/Procedure you wish to have performed? _____

When did your pet eat last? _____

Is your pet currently taking medications? Yes or No If yes, what medications,
and when was the last dosage? _____

Please list any personal belongings: _____

Did you want any additional services performed while your pet is here? (i.e.
vaccines, anal gland expression, heartworm test): _____
Please ask that these additional services be added to your estimate.

*****There will be a \$3.00 per minute charge
for pets picked up AFTER CLOSING (6pm)*****

Signature: _____ Date: _____