

Medical Consult Addendum

) from APA!, who has the following medical needs:	
or Suspect Diagnosis	•		
		☐ Urinary / Fecal Incontinence ☐	
nary: □ Idiopathic Cystitis □ Bladder Stones □ Chronic Kidney Disease □ rdiac: □ Heart Murmur □ Congenital Disease(PDA/PS/AS) □ Heart Failure □			
: 🗖 Asthma 🗖 Tracheal C	Collapse 🖵 (Chronic Rhinitis 🚨 Brachycephalic 📮	
GI: ☐ IBD ☐ Megaesophagus ☐ Chronic Diarrhea ☐			
☐ Hyperthyroidism ☐ Diabetes ☐ Cushings or Addisons ☐ ☐ Cataracts ☐ Eyelid Agenesis ☐ Corneal Ulcer ☐ Blind ☐			
□ Stomatitis □ Dental Disease □			
Skin/Ears: Allergies (fleas/food/environment) Ear Infections Wounds Mast Cell Tumor Unknown Mass Immune Mediated (Pemphigus, other) Arthritis Hip Dysplasia Ligament Tear(CCL) Luxating Patella Fracture			
□ Recent Orthopedic surgery □ Dislocation □			
		ollowing meds per the APA! Vets' instruction	
edications are needed	U		
Veterinary Recommendations: Restrictions: □ Cage rest: no running, jumping, etc			
Monitor/ Other			
<u>I:</u> □ Medical Pre-Adopt fo	or:	WOT AVAILABLE for adoption at this time until will be responsible for all medical care	
idopt animal, including ar aims to provide the level rovide. owledge and understand	ny decisions of medical of that this is a	le discretion over the medical care of my foster or regarding diagnostics and treatment. As a rule of care that an animal lover of average means could all the medical information reasonably known or	
	□ Seizures □ Paralyse □ Idiopathic Cystitis □ □ Heart Murmur □ Cor □ Asthma □ Tracheal Cor □ IBD □ Megaesophagu □ Hyperthyroidism □ Dore Cataracts □ Eyelid Ar □ Stomatitis □ Dental □ Allergies (fleas/food/□ Unknown Mass □ Im □ Arthritis □ Hip Dyspl □ Recent Orthopedic sures: I will continue to administations □ Cage rest: no running, □ Cage rest: no running, □ Private vet within 14 day □ Lifelong medical managuer - □ This animal is □ AVAI □ Medical Pre-Adopt for □ NOT Medical Pre-ado	Heart Murmur Congenital Disc Asthma Tracheal Collapse	

By signing below, I am acknowledging that I have been counseled on the above by APA! Staff and agree to all of the expectations that the APA! Medical Team has set forth.			
APA! Representative			
Foster/Adopter Print Name	Signature		
Additional Medications:			
Additional Veterinary Recommendations:			

may be limited, especially for new intakes. Medical needs/diagnoses are fluid and subject to change at

any time.