# **MEDICAL HISTORY**

| Date | Explanation |
|------|-------------|
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |
|      |             |

# **DEWORMING SCHEDULE**

Date Product administered and dose given

### **NOTES**

**Don't Forget a Deworming Schedule** Your deworming schedule and the type of dewormer you choose will depend upon your geographic location, its climate and the number of animals you have. Feel free to contact your vet or a Revival Pet Care Consultant if you have questions.

#### **Internal & External Parasite Control**

Complications and diseases from parasites including heartworms, fleas and ticks are preventable. Contact your vet or a Revival Pet Care Consultant to discuss the best parasite control methods for your pet.

Product administered and dose given

## **FLEA & TICK SCHEDULE**

Date

# **MICROCHIP ID**

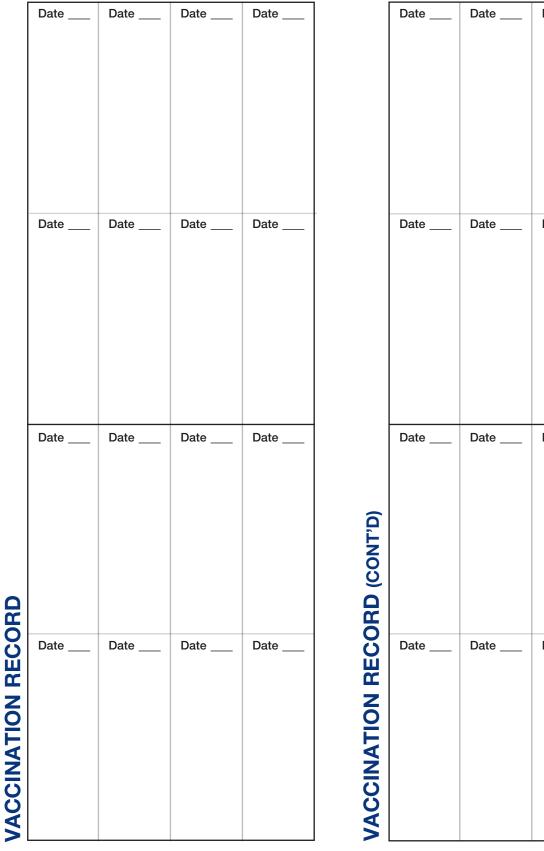
Microchip ID # \_\_\_\_\_

Registration Date \_\_\_\_\_

Registration Confirmation #\_\_\_\_\_

#### Get Your Pet Home Safe

Microchipping provides your pet with lifelong identification. When someone finds your pet, they will scan him for a microchip, retrieving your unique identification number. This allows shelters or vets to retrieve your contact information and connect with you to ensure that your pet returns home.



# Date \_\_\_\_ Date Date \_\_ Date \_\_\_\_ Date Date Date Date

# WE TAKE CARE OF PEOPLE WHO TAKE CARE OF PETS

Revival Animal Health provides products and advice to dog and cat owners nationwide. We are an animal health care supply company located in Orange City, Iowa. We have been a reliable source for what pet owners need for over 25 years. You can depend on Revival's friendly Pet Care Consultants to direct you to the correct products, quickly answer your questions and recommend the best solutions for your canine companion. We look forward to serving you and helping you care for the newest member of your family!





RevivalAnimalHealth.com 800.786.4751

# FELINE HEALTH RECORD

This record should be taken to all vet appointments.

# **FELINE INFORMATION**

| Name                 |
|----------------------|
| Date of Birth        |
| Breed                |
| Male Female          |
| Spayed Neutered Date |
| Marking              |

# **OWNER INFORMATION**

| Owner           |  |  |  |
|-----------------|--|--|--|
| Phone #         |  |  |  |
| Breeder         |  |  |  |
| Breeder Phone # |  |  |  |
| Date Acquired   |  |  |  |

# **OTHER INFORMATION**

| Veterinarian      |  |
|-------------------|--|
| Phone #           |  |
| Emergency Contact |  |
|                   |  |