



Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ All Kids Card# _____

Pet's Name _____ Dog/Cat Male/Female Spayed/Neutered

Breed _____ Birthday _____

Heart to Heart is a community outreach project by Clyde's Animal Clinic to aid in the prevention of heartworms in dogs. This service is on a first come first serve basis as supplies and donations are limited. provide your All Kids. An initial heartworm blood test will be performed on each pet. A negative result tells us that your dog does not have mature female pregnant heartworms in the dog's heart or lungs. If your dog has never been on heartworm preventive or has missed doses, they could still have heartworms too young or immature for the test to detect. This is why heartworm preventive must be given every thirty days to keep your pet healthy. Upon your dog's negative test, one dose of heartworm preventive will be administered. You will need to bring your dog in every month to receive their heartworm preventive. The cost of the program is \$5 each month, which covers the diagnostic testing and professional services. The heartworm preventive medications are donated by the manufacturer and some product may be beyond best use dating. I acknowledge, that in no way, hold Clyde's Animal Clinic liable if my dog would become infected while on this program. I understand that it is my responsibility to bring my dog in each month to receive their heartworm preventive as failure to miss even one dose, can result in heartworm disease. Heartworms are carried by mosquitoes and just one bite can cause the infection. Heartworms have been diagnosed in all 50 states and around the world. Heartworms grow up to 12-15" in length and live in the right heart and pulmonary vasculature. If left untreated, heartworm disease is most often fatal.

Owner Signature: _____ Date: _____

*****Office Use*****

Heartworm Test Date _____ Results _____ Additional Info _____

January _____ February _____

March _____ April _____

May _____ June _____

July _____ August _____

September _____ October _____

November _____ December _____

Payment: January ____ Feb ____ March ____ April ____ May ____ June ____ July ____ Aug ____ Sept ____ Oct ____ Nov ____ Dec ____