

PAH Hospital and Financial Policies

1. PAH does not offer any payment plans for your pet's estimated treatment. Payment is due at times of services rendered.
 - a. PAH can happily take any major credit card for your pets treatment
 - b. PAH will gladly help you apply for Care Credit Account

INITIALS : _____

2. PAH will require a deposit if your animal is recommended to be hospitalized for treatment of any illness. This deposit will be taken at the time of admission to our facility. The remainder of the costs incurred will be due at the end of the hospitalization period.

INITIALS : _____

3. If you are unable to afford the deposit, we will have to refer you to another facility.

INITIALS : _____

4. If you have limited funds for your appointment, please let us know at the onset of your appointment. We are happy to work within your financial limits to the best of our abilities.

INITIALS : _____

5. We do not accept checks at PAH

INITIALS : _____

6. We reserve the right to charge a late fee if you are late for your scheduled appointment

INITIALS : _____

7. We reserve the right to charge a fee if not given at least 24 hour notice of an appointment cancellation or in the event of a no show for your scheduled appointment.

INITIALS : _____

8. Any and all estimates are just that, estimates. Final costs may differ from any estimates given. We will do our best to notify you if the final cost will differ drastically from any estimates we provided.

INITIALS : _____

9. We will charge a prescription fee for any written scripts dispensed for medications that we also stock in our facility

INITIALS : _____

10. Any and all medications, prescription food, flea & tick medications, or any other merchandise sold at PAH are the property of the purchaser once they have left our facility. No Refunds will be issued. No Exceptions.

INITIALS : _____

11. Any special medications or diets that are to be ordered for your animal by PAH will require payment in full prior to the order being placed.

INITIALS : _____

12. We require you to have your animal under control at all times. This means either in a carrier or on a leash.

INITIALS : _____

13. If any other person will be bringing your animal into our facility for any reason. Please make sure they have the authority to sign the paperwork that we require to treat your animal. Also understand that you will be responsible for any costs incurred by the forms that they signed.

INITIALS : _____

14. Once you as owner have signed this document and acknowledged these policies. If any other person brings your animal to our facility for any reason, it is your responsibility as owner to make sure they are informed and aware of these policies of PAH.

INITIALS : _____

15. During your appointment, Dr Shreves may use an audio recorder to take medical notes and you may be asked to verify that the information he is dictating is correct. PA is a 2 person recording state, so if you do not wish Dr Shreves to record during your appointment, please let us know at the start of the appointment and we will do as you wish.

- a. Note : This recording is for medical record purposes only, your private conversations will not be recorded.

INITIALS : _____

We at PAH apologize for any inconvenience that these policies may cause you, please understand that we are simply trying to inform every one of our policies and head off any misunderstandings before they occur. We will provide you a copy of these policies for you to take home and keep a copy in your hospital file.

Date : ____/____/____

Owner : _____