PET MEDICATION CARE HANDOFF

Build the baseline

Write facts and sources before filling the main table. Do not guess at missing information.

Project or subject

Date or period

STEP 1 Note observed administration or an outstanding question, without guessing.

STEP 2 Identify the person taking over care and keep the veterinary plan separately.

STEP 3 Mark an entry reviewed only when the intended person actually checked it.

STEP 4 Which fact or document still needs checking?

PET MEDICATION CARE HANDOFF

Keep a dated record

Record what actually occurred. Reprint this page whenever you need more rows.

Reference period

Review date

OBSERVED DATE AND TIME	OBSERVED EVENT OR QUESTION	NEXT CARETAKER	REVIEW STATUS	PRESCRIPTION OR VET PLAN REFERENCE

Outstanding question or record to confirm

PET MEDICATION CARE HANDOFF

Make the next step happen

Each useful action has an owner, a date and a result that can be checked.

ACTION 1 Note observed administration or an outstanding question, without guessing.

Concrete next action	Owner / due

ACTION 2 Identify the person taking over care and keep the veterinary plan separately.

Concrete next action	Owner / due

ACTION 3 Mark an entry reviewed only when the intended person actually checked it.

Concrete next action	Owner / due

IMPORTANT CONTEXT

This is not veterinary dosing advice or a medication administration authorization. Check with a veterinarian for missed or uncertain doses.

- [ ] Source checked
- [ ] Next action assigned