

# 2022 ALL BREED HEALTH CLINIC Pricing Worksheet

## Sponsored by Poodle Club of the Lehigh Valley

<b>Name</b>	<b>Home Phone</b>
<b>Street Address</b>	<b>Cell Phone</b>
<b>City, State, Zip</b>	
<b>Dog's Call Name</b>	<b>Email</b>
<b>Breed</b>	<b>Age</b> <b>Sex</b> <b>Spay/Neuter</b> <b>Y</b> <b>N</b>

\*\*\*Bring AKC registration to fill out OFA forms\*\*\*

Available Tests	Price List	Your Tests
<p><b>(If ordering tests from Hemopet, complete this section in addition to Hemopet form.)</b></p>		<p>(copy subtotal into this box)</p> <p>↓</p>
Hemopet/Hemolife Blood Tests (total from Hemopet order sheet).....	\$ _____	
Shipping/Handling.....	+\$15.00	
<p>Add HemoPet total and S/H to get subtotal. Copy this subtotal into the column to the right.</p>		<p>\$ _____</p> <p>(subtotal)</p>
OFA Eye Exam with Dr. Aguirre	<b>\$50.00</b>	\$
OFA Eye Exam with Dr. Aguirre (Australian Shepherd, Dalmatian, and any merle dog (regardless of breed)	<b>\$55.00</b>	\$
Non OFA Eye Exam with Dr. Aguirre	<b>\$45.00</b>	\$
VetGen Tests Coupon for poodles - Discount Test Order Sheet for VWD,DM, MTC, NEWS, PRA-rcd4 VetGen Tests Coupon for other breeds – Discount Coupon Available for all other tests. <small>Pick up order sheet and/or coupon at clinic.</small>	<b>\$5.00</b>	\$
Rabies Immunization	<b>\$20.00</b>	\$
DA2PP Immunization	<b>\$20.00</b>	\$
MICROCHIP (with lifetime prepaid enrollment)	<b>\$40.00</b>	\$
IDEXX Snap 4+ (tests for heartworm, Lyme, E. Canis, A. Phag) Results same day after blood draw	<b>\$40.00</b>	\$
<b>The following three tests may be added on day of clinic if dog tests positive on the IDEXX Snap 4+. Requires a second blood draw with fee of \$15.</b>	<b>\$15.00</b>	\$
<b>ProtaTek Lab titer for E. canis positive dogs. We will provide test order form and blood sample. You send payment and blood tube to Protatek</b>		\$
<b>ProtaTek Lab titer for A. phag. Positive dogs We will provide test order form and blood sample. You send payment and blood tube to Protatek</b>		\$
<b>Hemopet C6 test (mark this box only if ordered on day of clinic after SNAP results)</b>	<b>\$135.00</b>	\$
<p><b>Make checks payable to PCLV</b> unless otherwise specified. Mail forms and checks to: Dorothy Schneck 150 Black Oak Drive Kunkletown, PA 18058 Phone 570-629-4064 Email <a href="mailto:pawstlrn@ptd.net">pawstlrn@ptd.net</a></p>	<p>If you have questions or need help filling out this paperwork, please contact Dorothy Schneck by phone at 570-629-4064.</p>	<p><b>My Total Check to PCLV ⇨</b> (Add HemoPet and PCLV fees in column on right)</p> <p>\$</p>