

### Dog Care Notes

### **PRINTABLE RESOURCES**

Print the pages that make sense for your dog and your situation.

### **HOW TO USE YOUR FREE PRINTABLES**

Everything here is designed to make your sitter's job easier and your dog feel understood.

### Total printable pages: 14

Print with 0.5 cm margins (or "Fit to page") for best alignment.

All forms show "Page x / x" where multiple pages are required.

### **Before printing**

- Print single-sided (Especially for medication pages)
- · Review each section and pre-fill everything the sitter should not guess.
- Keep your printed set together with your logbook.

### Meet Me in Motion (video guide)

This section is not meant to be printed.

Use the clickable buttons to record, upload, and generate your QR code.

Then place the QR on page 15 of your logbook.

### List of printables included with your logbook

- Emergency Quick Strip (1 page)
- House Card (2 pages)
- Medication Authorization (2 pages)
- Daily Medication (2 pages)
- As Needed Medication (2 pages)
- Chronic Condition (4 pages)
- Additional owner notes (1 page)

- → keep it visible (fridge, entry, sitter bag)
- → home rules, zones, access, safety
- → if your dog has any treatment
- → Plan for owner & Log for sitter
- → Plan for owner & Log for sitter
- → Plan for owner & Log for sitter

### **MEET ME IN MOTION | QUICK SETUP GUIDE**

Create one short video. Reuse it for every sitter.

A video helps the sitter understand your dog's usual pace, energy, and cues without guessing.

These pages are not meant to be printed.

It is an interactive guide with clickable links
to help you record and share your Meet Me in Motion video.

### **STEP 1: RECORD YOUR VIDEO**

- 1. Record how your dog walk or greet
- 2.A few basic cues (Sit, Wait, Come)
- 3. How they like to play or be approached

Show your **way** of giving cues. The sitter will match your tone and timing.

No editing. Normal light. Normal life.

### STEP 2: UPLOAD YOUR VIDEO

Choose one of these free options:

### Option A: YouTube (recommended)

Click the button below

or go to: https://youtube.com/upload

Title: Meet [Dog's Name]

Set visibility to Unlisted

Publish and copy the link

Upload on YoutubeStudio

### **MEET ME IN MOTION | QUICK SETUP GUIDE**

### **Option B: Google Drive**

Click the button below

or go to: https://drive.google.com

Upload your video → Right-click → Share

Set to Anyone with the link → Viewer

Copy the link

Upload on Google drive

### **Option C: Dropbox (or any other platform)**

Click the button below

or go to: https://www.dropbox.com/home

Upload your video in your Dropbox

Make sure the link can be opened without login

Copy the link

Upload on Dropbox



### **STEP 3: CREATE YOUR QR CODE**

Click the button below

or go to: https://www.grcode-monkey.com

Paste your video link

Download your QR (PNG or PDF)

Open QR generator



### STEP 4: ADD IT TO YOUR LOGBOOK

Print your QR (approx. 5 cm / 2 in).

Place it in the "MEET ME IN MOTION" box on The Dog page, page 15.

### **PRIVACY**

Your video stays in your own online account (Youtube, Drive, Dropbox, iCloud, etc.).

The QR code simply points to your link. Nothing is uploaded or saved by us.

This helps your sitter understand your dog faster, with less guesswork.

### **EMERGENCY QUICK STRIP | KEEP THIS VISIBLE**

Essential info in one place for fast decisions. Perfect for fridges or sitter bags.

Dog's name:	Owner's Phone:
Backup emergency contact:	
Vet clinic:	Phone:
Allergies (food & meds):	
Essential medication:	
How to approach the dog (e.g. anxiou	s, slow movements):
Other important notes:	

### **HOUSE CARD**

ENTRY & S	SAFETY
Door / building code (if any):	
Auto-lock door: ☐ Yes ☐ No	
Main door closing behavior (slow / fast / ne	eeds to be held):
Alarm (if present) Arm / Disa	rm code:
Quick instructions:	
Escape risks (balcony, yard, etc.):	
DOG STATION (where	to find essentials)
Leash / harness / collar:	
Poop bags:	
Towels / wipes (post-walk):	
Treats / reward jar:	
Bowls located:	
Food stored:	
Fridge items (if any):	
Boots/coat (if used):	
Feeding amounts & schedule are already	y in the FOOD section of the logbook.
ZONES & BOU	JNDARIES
$\square$ Dog allowed in bedroom	☐ Dog free in all rooms
☐ Dog must stay in these rooms only:	

### **HOUSE CARD**

FIRST AID / POTTY / CLEAN-UP	The state of the s
First-aid kit (tick remover, antiseptic):	
Potty route or courtyard / yard access notes:	
Clean-up supplies (spray, paper, bags):	
Trash / recycling location + pickup day:	
VISITORS / DOOR ROUTINE	
Doorbell reaction (barks / ignores / runs to door):	
Deliveries / neighbors to avoid triggering:	
NOTES	

### **MEDICATION ADMINISTRATION AUTHORIZATION**

This authorization covers all medications listed in the Medication Plan of this notebook.

Dog name:		Owner name:					
Sitter name:		Valid from:	to:				
CHECK ON	ILY WHAT THE	SITTER IS AI	LOWED TO DO				
☐ Oral meds		Eye drops					
☐ Liquid (oral syringe)		Ear drops					
☐ Topical / spot-on		Injection:	$\square$ Allowed $\square$ Not allowed				
	IF INJECTIO	NS ALLOWE	ED.				
Injection site:		R	equires muzzle: 🗆 Yes 🗆 No				
Technique notes (hold /	comfort):						
	IF INJECTIONS	S NOT ALLO	WED				
	→ In case a	dose is due.					
☐ Contact vet clinic	☐ Bring dog t	o vet $\square$	Owner will return to medicate				
☐ Other:							

### **MEDICATION ADMINISTRATION AUTHORIZATION**

DR	UG ALLERGIES / NOTES
EN	MERGENCY CONTACTS
<u> </u>	
Vet clinic:	Phone:
Owner reachable at:	
owner reachaste at:	
Emergency	transport consent:     Yes   No
	the dog to the nearest vet in case of emergency.
roo, eoa, a.a.opere	
SIGI	NATURES & AGREEMENT
_	s to follow the written medication plan
and contact the own	ner or a veterinary professional if unsure.
Owner signature	Date
244	Data
Sitter signature	Date

### If a dose is missed follow owner's instruction ☐ Give within \_\_ h ☐ Give within \_\_\_ h ☐ Give within \_\_\_ h ☐ Give within \_ ☐ Call owner ☐ Call owner ☐ Call owner ☐ Skip Skip ☐ Skip ☐ Skip (e.g. Pill pocket / In cheese / Syringe) To be completed by the owner How to give food? □ Yes □ Yes □ Yes □ Yes 0 □ 0 □ 0 | | With Time(s) (am/pm) Dose (units) **DAILY MEDICATION PLAN** Treatment dates: Storage / Temp (e.g. pain relief, allergies,anxiety) Purpose name Med

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% □

☐ Call owner

ter		l energy)	Notes (e.g. ate well, slept more, vomited, low energy)												TH PURCHASE Page 2 / 2
To be completed by the sitter		(e.g. 2025-04-03   7:30 AM   Omega-3 oil   5 mL  Given  Ate breakfast normally, good energy)	(e.g. ate well, sle	☐ Owner notified		☐ Owner notified			☐ Owner notified			☐ Owner notified			ES   ALL RIGHTS RESERVED   PRINTABLES INCLUDED WITH PURCHASE
To be con	Stay dates:	5 mL  Given  Ate br	Status	☐ Given ☐ Refused	☐ Missed	Given	☐ Refused	☐ Missed	Given	☐ Refused	☐ Missed	☐ Given	☐ Refused	☐ Missed	LL RIGHTS RESERVED   F
ON LOG		I   Omega-3 oil	Dose (units)												G CARE NOTES   A
DAILY MEDICATION LOG	Pet sitter name:	2025-04-03   7:30 AN	Med												© 2025 CAREWISE EDITIONS   DOG CARE NOT
	Pet sitte	(e.g. 2	Time given												© 2025 CAI
			Date												

### Page 1 / 2 To be completed by the owner Who to contact after giving the dose © 2025 CAREWISE EDITIONS | DOG CARE NOTES | ALL RIGHTS RESERVED | PRINTABLES INCLUDED WITH PURCHASE □ Owner □ Owner □ Owner □ Owner □ Vet □ Vet □ Vet $\square$ Vet **Emergency vet:** (e.g., breathing, pacing, rest, observe eating, disorientation...) Aftercare / Monitor **AS NEEDED MEDICATION PLAN: ONLY IF SYMPTOMS OCCUR** If unsure: DO NOT repeat (max/24h) Repeat? Vet: (e.g. pill in cheese, under skin, calm tone...) How to give (tablet, drops...) Med & Dose (e.g. shaking, seizure, panic, Contact Owner: limping, vomiting...) Trigger

### Page 2 / 2 If a dose is refused notify the owner. (e.g. ate well, slept more, vomited, low energy) © 2025 CAREWISE EDITIONS | DOG CARE NOTES | ALL RIGHTS RESERVED | PRINTABLES INCLUDED WITH PURCHASE Notes (e.g. 2025-02-03 | 7:30 PM | Trazodone | 50 mg | given | Mild anxiety before walk. Calmer after 30 min) ☐ Owner notified ☐ Owner notified □ Owner notified ☐ Owner notified ؙؚڡ ☐ Refused ☐ Refused ☐ Refused ☐ Refused To be completed by the sitter Status ☐ Given ☐ Given ☐ Given ☐ Given Stay dates: Dose (units) Med Pet sitter name: **AS NEEDED MEDICATION LOG Time given** Date

### **CHRONIC CONDITION PLAN | OWNER SECTION**

For dogs under long-term treatment (e.g. diabetes, heart, epilepsy, arthritis).

Fill clearly so your sitter can follow the routine safely and calmly.

Dog name:	Con	dition:	
Vet / Clinic:		Phone:	
Emergency Clinic:		Phone:	
Owner Name:		Phone:	
I	F SOMETHING	GOES WRONG	G
Dog refuses to eat:	☐ Skip dose	☐ Call owner	☐ Other:
Vomiting / weakness:	□ Call vet	□ Call owner	☐ Other:
Missed dose:   Wait	next scheduled c	dose 🗌 Call o	wner 🗌 Other:
Other Situation:			
		AL FOR MY DO	
	OWNER S	IGNATURE	
I confirm the above info			sitter to follow this plan.
Signature:		Date:	
© 2025 CAREWISE EDITIONS   DO	OC CARE NOTES   ALL DIC	LITE DECEDVED   DDINITAE	DI EC INCLUDED WITH DUDCHACE

### How to give it / notes (e.g. Insulin | 4u | twice daily at 7 AM / 7 PM | No : after meal | fridge | inject under skin, calm voice) To be completed by the owner Storage ☐ Room ☐ Fridge ☐ Fridge □ Room ☐ Fridge ☐ Fridge □ Room □ Room meal? With ☐ Yes ☐ Yes ☐ Yes ☐ Yes 9 | | % □ % □ % □ **CHRONIC CONDITION PLAN** Frequency time Dose (units) Med name

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## **CHRONIC CONDITION PLAN**

# To be completed by the sitter

Owner fills the first line(s) with the routine. Sitter continues the log during care. Record each dose and how the dog feels.

	Checked by (Initials)			Page 3 / 4
nproved mobility after 20 min  XX)	Reaction / Change (e.g. Missed, vomit, weakness, refused food, low energy, unusual mood)			© 2025 CAREWISE EDITIONS   DOG CARE NOTES   ALL RIGHTS RESERVED   PRINTABLES INCLUDED WITH PURCHASE
pentin 100 mg  I.	Med / Dose (e.g. Insulin 4 u)			3HTS RESERVED   P
(e.g. 2025.01.14  7:30 AM   normal appetite   Gabapentin 100 mg  Improved mobility after 20 min  XX)	Condition / Observation (e.g. Eats well, low energy, playful, stiff walk, good appetite)			EDITIONS   DOG CARE NOTES   ALL RIG
(e.g. 2025.01.14	<b>Time</b> AM / PM			© 2025 CAREWISE
	Date			

### Page 4 / 4 Ву (e.g. 2025.01.14 | 7:30 AM | normal appetite | Gabapentin 100 mg | Improved mobility after 20 min | XX) © 2025 CAREWISE EDITIONS | DOG CARE NOTES | ALL RIGHTS RESERVED | PRINTABLES INCLUDED WITH PURCHASE To be completed by the sitter Reaction / Change Med / Dose Condition / Observation **CHRONIC CONDITION PLAN** Time Date

### **OWNER NOTES**

Use this page for any additional details or personal instructions.