HOSPICE CARE COVERAGE

WHAT MUTTVILLE COVERS FOR HOSPICE DOGS:
Muttville provides hospice dogs palliative care in order to help relieve suffering and improve the quality of life for dogs with serious, chronic, and life-threatening illnesses. Muttville covers the cost of hospice medical care with Muttville Veterinary Partner Hospitals, as outlined below. Hospice adopters may use a veterinary hospital that is not a Muttville Veterinary Partner, but itemized invoices are required and are subject to approval for reimbursement.

Items covered:
- Veterinary exams, including quality of life exams with Pethospice.com
- Tests and re-tests, as determined by the treating veterinarian and subject to approval by Muttville (such as blood or urine tests, x-rays, etc.)
- Pain management to help dogs remain comfortable
- Prescription food up to $150/month
- Vaccinations
- Flea and deworming treatments
- Medications for chronic conditions
- Subcutaneous fluids
- Care items available in our donation inventory
- Antibiotics for infections
- Euthanasia services and communal cremation
- Acupuncture with Muttville's volunteer acupuncturists (every Wednesday 12pm-3pm. Email vettech@muttville.org for an appointment)

WHAT MUTTVILLE DOES NOT COVER FOR HOSPICE DOGS:
Hospice parents may choose to pursue more extensive treatments themselves if they are in a financial position to do so and if it is in the dog's best interest.

Items NOT covered:
- Surgery or anything requiring anesthesia
- Advanced diagnostics (i.e. ultrasounds, CT scans, MRIs)
- Hospitalizations over 24 hours
- Offsite physical therapy, acupuncture, and cold laser therapy
- Radiation, chemotherapy
- Food (except for prescription diets up to $150/month)
- Supplements, fish oil
- Pee pads
- Boarding services at headquarters or elsewhere
- Private cremation with ashes returned
- Grooming services
- House cleaning services
- Aspirates/biopsies
- CPR

EMERGENCY CARE:
Adopters are responsible for all emergency care and will be reimbursed for covered treatments as listed above.

I have read and understand the palliative care coverage plan as outlined above:

Adopter's signature: _______________________ Printed name: _______________________ Date: ___________ Dog: ___________

Please share this document with your treating veterinarian.