



THE PAWSITIVE HEALTH HANDBOOK FOR CAT PARENTS





Keeping all your kitty's health info in one handy binder isn't just smart—it's like having a personal cat care cheat sheet! Think about it: with everything from meds to vet visits and even pet insurance details neatly organized, you're ready to tackle anything that comes your furry friend's way. No more scrambling to remember when they were last dewormed or which vet to call in an emergency—just flip open the binder and you've got it all at your fingertips!

And hey, it's not just about emergencies either. Having all those little details tucked away means you're staying on top of your cat's health game like a pro. From making sure they're up to date on vaccinations to keeping track of their favorite cat sitter's contact info, you're setting them up for nothing but the best care. Plus, when it comes to meds, no more guessing games! With clear records of dosages and schedules, you'll never miss a beat in keeping your fur baby feeling their best.

So, let's make life a little easier—for you and your whiskered pal. Grab that binder, fill it with all the cat care essentials, and pat yourself on the back for being the ultimate pet parent. With everything organized and ready to roll, you and your cat can enjoy more snuggles and fewer worries.

Print out a copy of the Handbook, fill in the information that you have at the moment and keep it updated as you go. Print a copy for each of your cats!

MY CAT'S INFORMATION

NAME

PHOTO

BASIC INFO	
BIRTHDAY	
ADOPTION DATE	
AGE AT ADOPTION	
BREED	
MARKINGS	
MARKINGS	
DATE NEUTERED/SPAYED	
ALLERGIES	
MICROCHIP NO.	

VET INFO	
NAME	
PHONE NO.	
24/7 NO.	
EMAIL	
ADDRESS	

MY INFO	
NAME	
PHONE	
EMAIL	
CITY	

VACCINATION LOG

[illegible]

DEWORMING LOG

[illegible]

OTHER PROCEDURES

[illegible]

CAT FEEDING TRACKER

SOMETIMES IT CAN BE HARD TO KEEP TRACK OF YOUR CAT'S LIKES AND DISLIKES - ESPECIALLY WHEN THEY GET OLDER AND FUSSIER. Keep track of their preferences here.

	TIME	FOOD	QUANTITY
DATE: MPM	AM		
DATE: TPM	AM		
DATE: WPM	AM		
DATE: TPM	AM		
DATE: FPM	AM		
DATE: SPM	AM		
DATE: SPM	AM		

CONTACT INFORMATION

MY CAT'S TEAM

VET	
NAME	
PHONE	
EMAIL	
ADDRESS	
CITY	

SPECIALIST	
NAME	
PHONE	
EMAIL	
ADDRESS	
CITY	

SPECIALIST	
NAME	
PHONE	
EMAIL	
ADDRESS	
CITY	

24/7 VET	
NAME	
PHONE	
EMAIL	
ADDRESS	
CITY	

CAT SITTER	
NAME	
PHONE	
EMAIL	
ADDRESS	
CITY	

MY SUPPORT	
NAME	
PHONE	
EMAIL	
ADDRESS	
CITY	

PET INSURANCE INFORMATION

☐ SUBMIT CLAIM AFTER TREATMENT?

☐ OUTSTANDING CLAIMS?

PROVIDER & TEL. NO.

CAT'S NAME	POLICY NO.	RENEWAL:	ANNUAL \$ LIMIT:
------------	------------	----------	------------------

NOTES

☐ SUBMIT CLAIM AFTER TREATMENT?

☐ OUTSTANDING CLAIMS?

PROVIDER & TEL. NO.

CAT'S NAME	POLICY NO.	RENEWAL:	ANNUAL \$ LIMIT:
------------	------------	----------	------------------

NOTES:

☐ SUBMIT CLAIM AFTER TREATMENT?

☐ OUTSTANDING CLAIMS?

PROVIDER & TEL. NO.

CAT'S NAME	POLICY NO.	RENEWAL:	ANNUAL \$ LIMIT
------------	------------	----------	-----------------

NOTES:

MY CAT'S PROCEDURE TRACKER

WHO DID YOU SEE? FOR WHAT? List your cat's tests, procedures, diagnoses, etc here
- eg scans, x-rays, teeth cleaning, accidents, etc

VISIT DATE	NAME OF VET	PROCEDURE	RECOMMENDATIONS

WHAT HOME CARE CAN I DO?

DESCRIBE ONGOING SYMPTOMS

MY CAT'S MEDICATION TRACKER

RECORD YOUR CAT'S MEDICATION & DOSE. For recurring doses, color in the dots as you're able to give it to them.

	MON	TUE	WED	THU	FRI	SAT	SUN
EX: SEMINTRA							
							
							
							
							
							
							
							
							
							
							
							
							

[illegible]

