

Date _____

Your Name _____

Phone number _____

Email address _____

Pet's Name _____

Age _____ (yrs., mos, wks)

Weight _____ lbs

1. What is the presenting complaint (why did you bring your pet in today)?

2. How long has your pet been sick?

3. Have the signs gotten better or worse since you first noticed them? Explain:

4. Have you tried any treatments at home? If so, what have you tried? Please include any medications, topical treatment, diet and exercise changes:

5. Is your pet exposed to other animals outside the home? If so, when and where?

6. Has your pet had any recent travel, where?

7. Has your pet had these signs before? How often?

8. Are any other animals or people around your pet ill? If yes, please elaborate

9. Has there been any exposure to toxins/garbage/abnormal food or treats/ medications? If yes, please elaborate

10. Has there been any trauma?

11. Note any following changes (More or less, chronic/progressive issue, duration):
 - Appetite:
 - Vomiting or diarrhea:
 - Weight:
 - Drinking or urinating:

12. Is there anything else you would like to discuss with the doctor today?