

## Patient History Form

Owner: \_\_\_\_\_ Patient: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

1. Why are you here today? \_\_\_\_\_

2. Do you have any general concerns about your pet? \_\_\_\_\_

3. Does your pet need vaccines today? \_\_\_\_\_ Do you know what vaccines are needed? \_\_\_\_\_

\_\_\_\_\_ We can help you determine what vaccines your pet needs if you do not know. The City of Rock Springs requires Rabies, DAPPV (dogs) and RCP (cats). Do you want Bordetella (dogs) or Feline Leukemia (cats)? \_\_\_\_\_ Other vaccines needed: \_\_\_\_\_

When was the last time your pet was dewormed? \_\_\_\_\_

Is your dog on heartworm preventative? \_\_\_\_\_

Where did you get your pet? (i.e. breeder, shelter, stray, etc.) \_\_\_\_\_

Have you ever traveled with your pet out of the area? If so where and how long ago? \_\_\_\_\_

Has your pet recently been away from its normal environment or around new animals? (i.e. to a pet store, a dog park, wandered around the neighborhood, etc.) \_\_\_\_\_

Is your pet kept indoors, outdoors, or both? If outdoors, describe the area where pet is kept. (i.e. shade, food, water, protection from weather, etc.) \_\_\_\_\_

Does your pet chew on or eat anything he/she shouldn't such as sticks, rocks, furniture, rugs, etc.? \_\_\_\_\_

Does your pet chew on toys or other objects? \_\_\_\_\_ If yes, have any gone missing or been chewed up lately? \_\_\_\_\_

Has your pet gotten into anything recently? \_\_\_\_\_ (i.e. Trash, pesticides, hazardous materials, etc.) If so, list: \_\_\_\_\_

What is your pet's current diet, and has it been changed recently? (How much is given, and how often he/she is fed. Include treats or any human food given.) \_\_\_\_\_

What is your pet's appetite like? Has it changed recently? \_\_\_\_\_

On a scale of 1-9 (1 being emaciated, 5 being ideal, and 9 being obese) where do you feel your pet's body condition/weight is? \_\_\_\_\_

Is there any weight loss? \_\_\_\_\_

What is your pet's water intake like? Has it changed recently? \_\_\_\_\_

Has your pet's attitude changed at all? (i.e. lethargic, depressed, vocalizing, irritable, etc.) \_\_\_\_\_

Does your pet seem to be in any pain? \_\_\_\_\_

If yes, on a scale of 1-10 (1 being almost none and 10 being excruciating) what do you feel is your pet's level of pain? \_\_\_\_\_

Does your pet have any other current medical or surgical conditions? If so, list: \_\_\_\_\_

List any current medications your pet is on: \_\_\_\_\_

Does your pet have any known allergies? If so, list: \_\_\_\_\_

What kind of exercise does your pet get and how often? \_\_\_\_\_

Has your pet's activity level been normal lately? \_\_\_\_\_

Does pet seem to have any trouble getting up or walking? Any limping? \_\_\_\_\_

Have your pet's bowel movements been normal? Describe your pet's bowel movements: (consistency, color, frequency, amount, etc.) \_\_\_\_\_

Where does he/she normally urinate? \_\_\_\_\_ Has it been normal? \_\_\_\_\_

Is urination frequency increased, decreased or the same? \_\_\_\_\_

Does he/she strain when going? \_\_\_\_\_ What is the urine quantity? (i.e. small amounts, large amounts, or not going at all) \_\_\_\_\_

Any vomiting? \_\_\_\_\_ If yes, how often, and what does it look like? \_\_\_\_\_

Is your pet coughing, sneezing, or having any difficulties breathing? \_\_\_\_\_

Is your pet having any nasal or eye discharge? If yes, describe. \_\_\_\_\_

Does your pet have any new lumps/bumps/growths? If yes, where? \_\_\_\_\_

Are there any health or behavior issues that you would like to discuss? If yes, please list: \_\_\_\_\_

List any other information about your pet that may be useful \_\_\_\_\_

**Please answer the following questions if you are here for a specific problem with your pet.**

What is the location of the problem? \_\_\_\_\_

What is the severity of the problem? \_\_\_\_\_

When did it begin? \_\_\_\_\_

How long has it been going on? \_\_\_\_\_

What time of day does it usually occur? (i.e. pet vomits every morning) \_\_\_\_\_

How often does it occur? \_\_\_\_\_

Has the problem improved at all over time, or has it seemed to progressively get worse? \_\_\_\_\_

What usually triggers the problem? (i.e. pet limps after playing) \_\_\_\_\_

Does anything make the problem seem better or less severe? \_\_\_\_\_

Does anything seem to make the problem worse or more severe? \_\_\_\_\_

Are there any other problems associated with the current problem? (i.e. the pet has diarrhea, but is now also vomiting.) \_\_\_\_\_

Has the pet had this, or a similar problem before? If yes, when? \_\_\_\_\_