



Owner Name: _____ Pet Name: _____

How long have you owned your pet? _____

When and what time was your pet's last meal? _____

Has your pet been showing any of the following symptoms in the last 14 days? Circle all that apply

- Vomiting • Depression • Coughing • Diarrhea • Not eating or drinking • Sneezing • Abnormal Peeing
• Discharge from eyes, nose or genitalia • Wheezing • Other: _____

Canine Patients: Has your pet been tested for heartworms? [] Yes [] No
If yes, when? _____ Results: [] Negative [] Positive
Is your pet currently on monthly heartworm prevention? [] Yes [] No
What activities will your dog be participating in? Circle all that apply
• Boarding • Grooming • Training Classes • Dog Parks • Being a "Social Butterfly" • Hiking, swimming
Dogs should be vaccinated against Bordetella (a.k.a. kennel cough) if their lifestyle includes any or all of the above activities.
Kennel cough is a contagious disease that is most commonly spread in areas where lots of dogs spend time together, but it can also be picked up from casual contact with other dogs.
Dogs should be vaccinated against Lepto Lepto is carried by wildlife such as rats, raccoons, opossums, skunks, squirrels, and deer. It is found in places where they might urinate, including lakes, streams, puddles or soil in your backyard.

Feline Patients: Has your pet been tested for FeLV and/or FIV? [] Yes [] No
If yes, when? _____ Results: [] Negative [] FELV Positive [] FIV Positive
What kind of lifestyle will your cat be living, both now and in the future? Circle all that apply
• Indoor Only • Indoor & outdoor • Living with cats that go Outdoors • Not Sure
Cats should be vaccinated against Feline Leukemia if they spend time outdoors, or if they live with cats that go outdoors, unless they are always supervised on a leash. Feline leukemia is a contagious disease that requires prolonged direct contact with an infected cat, making cats that go outdoors the most at risk. Kittens and young cats are more at risk than older adults.

What vaccines has your pet had this year?
[] Rabies [] Distemper/Parvo [] Bordetella [] FIV [] FVRCP [] FELV
Date Last Vaccinated? _____

Has your pet been de wormed? [] Yes [] No
If yes, when? _____ Medication? _____
Routine de-worming is highly recommended for puppies and kittens during their initial vaccine series and for adults at least once a year

Is your pet currently taking any medications? [] Yes [] No
If yes, what medications? _____

Has your pet ever had an allergic reaction to a vaccination or any medication? [] Yes [] No
If yes, when? _____ To what? _____

Has your pet been diagnosed with any previous medical condition? [] Yes [] No
If yes, what? _____
(Conditions include: Seizures, skin conditions, heart, kidney, and/or liver conditions, etc.)

Has your pet had ANY surgery in the past? Please explain below

Female patients: Is your pet possibly in-heat or pregnant? [] Yes [] No
Does your pet live inside or outside? [] Inside [] Outside [] Both