



Below are some questions we will be asking at your pet's visit with us. Please feel free to fill out the form below and send it back to us prior to your visit, bring it with you the day of your appointment or just take a look below so you have an idea of the information we are looking for. Please fax or e-mail any information to us at 719-282-1802 or francisvet@aol.com.

Pet's Name: _____ DOB: _____ Date of appointment: _____

I.
Diet: _____ Amount Fed: _____ How often: _____
Treats: _____ Amount Fed: _____ How often: _____
Any "people food?" How Often?: _____ Types: _____
Have there been any recent changes in your pet's eating or drinking habits? _____

Does your pet cough, sneeze, vomit or have diarrhea often? If yes, please explain: _____

II. Medications: Name/ strength (Please include preventatives and supplements):

- 1. _____ Frequency: _____
Why is your pet on this medication and how long have you been giving at current dose?

- 2. _____ Frequency: _____
Why is your pet on this medication and how long have you been giving at current dose?

- 3. _____ Frequency: _____
Why is your pet on this medication and how long have you been giving at current dose?

III.
What is the main reason for upcoming visit? : _____

Have the above concerns changed recently (improved or worsened) or remained the same?

How long has your pet experienced this?

Has your pet had this problem before? If yes, please explain.

IV.
Has your pet had any other health issues including surgical procedures? _____

Does your pet receive routine dental care? _____

Date of last dental cleaning? _____

Date of last routine blood panel? _____ Were the results normal? _____

V.

Is there any other information about your pet that you would like to share that will help make his/her visit with us go smoothly? _____

We look forward to seeing you and your pet soon!

Your name: _____

Today's date: _____