

Dog's Name: _____ Today's Date: _____

Your Name: _____ Co-owner's Name: _____

Has your address, phone number, or email address changed since your last visit? **Yes / No**

May we contact you via email? **Yes / No** email address: _____

Has your dog been micro-chipped? **Yes / No**

What is the reason for today's visit? _____

▪ **Behavior and Environment**

Have you noticed any changes in any of the following? Check all that apply and describe:

Family/pet interaction Elimination Sleep Appetite Water Skin/Coat Activity

Do you have other pets in the household? **Yes / No** If yes, what type? _____

Do you have children in the household? **Yes / No**

▪ **Diet**

My dog eats: Dry Canned Semi-moist What Brand? _____

Treats Vitamins Table Food Supplements _____

How many times a day is your dog fed and what amount? _____

▪ **Parasite Prevention**

Do you give your dog flea preventative **EVERY** month, year round? **Yes / No**

What type of flea preventative does your dog receive?

Vectra Comfortis Trifexis Frontline Advantix Other _____

Do you give your dog heartworm preventative **EVERY** month, year round? **Yes / No**

What type of heartworm preventative does your dog receive?

Interceptor Iverhart Trifexis Heartgard Revolution Other _____

▪ **Medications and Health Conditions**

Does your dog have any known medical conditions? **Yes / No** _____

Is your dog currently taking medication? **Yes / No** If yes, what? _____

Does your dog swim in ponds, lakes or drink out of puddles? **Yes / No** If yes, would you like your dog to receive the **Leptospirosis** vaccine? **Yes / No** (at no extra charge)

Does your dog visit a Groomer, Kennel or Dog Park? **Yes / No** *If yes, please note the Bordetella and Canine Influenza vaccinations are required at some facilities.*

Would you like your dog to receive the **Bordatella & Canine Influenza vaccines**? **Yes / No**

The Bordatella vaccine (\$24) is administered intra-nasally every 6 months.

The Canine Flu vaccine (\$36) is administered via one vaccination followed by one booster vaccination. Flu protection is then maintained with annual re-vaccination.

▪ **Wellness Plans**

Please select from below, the care Plan you would like your dog to receive today. Refer to the Pet Owner's Manual, in each exam room, for details:

Senior Canine Plan (6+ years old) Young Canine Plan (1-5 Years old)

Canine Wellness Vaccine Special Canine Vaccine Special