

Dermatology

COMMUNITY PET HEALTHCARE Created:
CLIENT:
NO PET ASSIGNED
Dermatology Please help us provide the best care for your pet by responding to the following questions prior to your pet's scheduled appointment. Thank you! 1. What problem(s) is/are your pet experiencing?
 2. Does your pet lick/chew/bite itself? Yes No I'm not sure 3. Have you seen any fleas or ticks on your pet?
Yes No
4. Where does your pet itch and/or scratch? (Please choose all that apply) Face Ears Under Arms Adbomen Front Feet/Legs Back (hind) Feet/Legs I'm not sure
5. How bad is the itching/scratching? (where 1 = minimal/rare; 10 = maximal/constant)
1 2 3 4 5 6 7 8 9 10 6. Does your pet have hair loss? Yes No
7. When did this problem start with your pet? In the last

8. Has a similar problem happened with your pet in the past?	
Yes No I'm not sure	
9. Is your pet currently on heartworm/flea/tick prevention?	
Yes No I'm not sure	
10. What prescription medications, supplements, or OTC medications does your pet receive?	
11. What is your pet's environment like? (Please select all that apply)	
 Wooded areas Standing water, Iakes, streams Your pet is kept indoors Grass, neighborhood, Farm, rural urban	
12. Is your pet eating and drinking normal amounts? If not, what changes have you noticed?	
13. Have you noticed any changes in your pet's urination or defecation habits (frequency of urinationm or defecation, diarrhea or excessively hard stool, etc.)?	
Yes No I'm not sure	
14. Has your pet had any vomiting, regurgitation or diarrhea?	
Yes No	
15. Has your pet been coughing or sneezing more than normal?	
No, no abnormal Yes, coughing and coughing or sneezing more than normal than normal sneezing normal	

