



Canine Annual Exam Questionnaire

Owner Name _____ Pet Name _____ Date _____

Is your dog presently on heartworm prevention? Yes or No

If so, which brand? _____ When was the last dose given? _____

Does your pet have exposure to ticks at home or when you travel? Yes or No

Does your pet have a microchip? Yes or No or Unsure

If not, would you like one inserted today Yes or No

Does your dog have access to stagnant or standing water (i.e. ponds, lakes, etc) or do you take your dog hunting or camping? Is your dog exposed to the same space as rodents, opossums, raccoons, deer, or other wildlife? Yes or No

*This is important, as our pets can become infected with a bacteria called Leptospirosis. Lepto causes kidney and liver failure, and can be given to the humans in the household before the pet shows signs of disease. There is a vaccine for this.

Does your dog get boarded, groomed, or have visits to the dog parks? Yes or No

*We are now carrying the influenza vaccine for dogs that are a high risk. Please note that this vaccine does not provide protection until 10-14 days after the second dose is administered.

What food are you currently feeding you pet? _____

Please note if you have noticed any of the following on your dog (circle any that apply):

Itching / chewing / scratching / licking For how long? _____

Vomiting / Soft Stool / Diarrhea For how long? _____

Coughing / Sneezing / Gagging For how long? _____

Strong odor from mouth / ears / body For how long? _____

Have you noticed any concerning new lumps? Note where they are on your dog's body: