



**LIFETIME
PET WELLNESS
CENTER**

NEW CLIENT HEALTH HISTORY QUESTIONNAIRE

614-888-2100 | lifetimepetwellness.com

454 Lazelle Road, Columbus, OH 43240

*By filling out this questionnaire ahead of time, it will allow us to have an idea of what is going on with your pet and save time at the appointment. Sending this in 48 hours prior to the appointment will also get you a **\$10.00 discount on the appointment cost.** We look forward to helping your pet get better!*

CLIENT INFORMATION

Name for account: _____ Name of Pet: _____

Date and Time of Appointment: _____

Date of Birth or Age of Pet: _____ Sex of Pet (M, F, FS, MN): _____

Primary issue(s)/concern(s) and approximate duration of each: _____

DIET TYPES AND DURATIONS

Current diet and for how long (include treats): _____

Past diet types and how long: _____

What was the response to each: _____

Know or suspected food allergy or intolerances: _____

VACCINATION AND DRUG HISTORY

Current supplements or drugs (please list name, strength and how often): _____

Current heartworm and flea/tick preventatives: _____

Past drug history (steroids, antibiotic, use (which ones and responses): _____

Vaccination history (gets all on time, only do minimal vaccinations, don't do any vaccinations): _____

Current on what vaccines?: _____

Current on heartworm test and preventatives?: _____

Any reactions to vaccinations? None Which ones? _____

What happened?: _____

Previous illness history (other than primary concerns): _____



PERSONALITY/CHINESE CONSTITUTION

- Wood (the boss) Fire (super excitable but usually friendly) Earth (easy going, friendly, usually food motivated)
 Metal (I follow all of the rules, don't get very upset) Water (scared, hides)
 Become grouchy or bite if doing something he/she doesn't like?
Tends to like areas that: Are very quiet Are very active/exciting Anywhere

TEMPERATURE PREFERENCE

- Cool seeking (hard floors, A/C vents) Heat seeking (warmer bedding, heater vents)
 Seeks out softer spots instead of temperature differences
Hate to go out when it is: Hot (Get overheated easily?) Cold
Spots on pet that feel hot to you: _____ None
Spots on pet that feel cold to you: _____ None
Panting when you think he/she should not (like at rest?) Yes No

WATER CONSUMPTION

- Less than expected Average
More than others: Always at the bowl Tanks up all at once Drinks alot throughout the day

APPETITE

- Normal Decreased Shows interest but does not eat Ravenous
Pica (eats weird things): None Stool Grass Garbage Other: _____

VOMITING

- No Yes If yes, how often: _____
 Burping a lot after eating Drooling but won't eat
Contains:
 Bile Fur Food (fresh) Food (digested) Bile Blood (black) Blood (red) Mucous

STOOL QUALITY

- Normal Loose Mucoid Bloody (red) Bloody (black) Watery Very Dry
Odor to stool: Not very smelly Very smelly
Flatulence: None Some Too much

SKIN

- Tends to be: Normal Dry Greasy Large flake Fine flake Dry lesions Moist lesions
Locations of lesions (if any): _____
Itching tends to be where (if appropriate): _____
Ear issues: _____

COUGHING/SNEEZING

- Coughing: None Dry Honking Productive
Worse In: AM PM All the time
Sneezing: Any? Any discharges from nostrils and which nostril: _____



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URINATIONS

- Normal Little amounts Large amounts/accidents inside Very concentrated (maybe kills grass)
 Very dilute Unsure of concentration

CONDITION WORSE WITH...

- Nothing Activity/Movement After laying around Change in weather/heat/cold/dampness
 At waking or during night time Or any time listed below:
 LU (3-5am) LI (5-7am) ST (7-9am) SP (9-11am) HT (11am-1pm) SI (1-3pm)
 BL (3-5pm) KID (5-7pm) PC (7-9pm) TH (9-11pm) GB (11am-1pm) Liv (1-3pm)

Sleeping okay? Yes No Lots of dreams? Yes No

AGILITY SPECIFIC QUESTIONS

What venue is run (AKC, USDAA, NADAK, UKC, CPE)? _____

Reason for visit or cause on non-Q? _____

Any refusals, flyoffs, floor slips if not listed above? _____

**Please bring any available radiographs
(they do not email—files are too large) and lab tests.**

THANK YOU FOR CHOOSING

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