

Your Dog's Annual Examination Report

Please complete the information below so we can keep our records up-to-date.

Your name _____ Date _____ Dog's name _____ Age _____ Weight _____ lb

If your contact information has changed since your last visit, please provide new information.

Street Address, City, State, Zip

(____) _____ (____) _____ (____) _____ _____
Home phone Work phone Cell phone Email

Do you have pet insurance? Yes No If yes, please list name of provider _____

Please complete the following information about your dog's health.

- Do you use heartworm preventive? Yes No If yes, list name _____ Date last administered _____
- Do you use a flea/tick preventive? Yes No If yes, list name _____ Date last administered _____
Have you seen fleas or ticks on your dog? Yes No
- Do you have other dogs or cats? Yes No If yes, how many? Number of other dogs _____ Number of cats _____
Are all dogs and cats currently vaccinated and on heartworm and flea preventive? Yes No
If no, please explain _____
Any other pets? Yes No If yes, please explain (type of animal, how many, general health) _____
- What best describes the amount of time your dog spends outdoors?
 Daily for bathroom/walks 50:50 Indoor/outdoor Outdoor dog
- Check if your dog does any of the following:
 Board Groom Dog Parks Obedience/training class Contact with neighborhood dogs Travels with you
- What brand of food do you feed your dog? _____ How much and how often? _____
- Do you provide any dental care for your dog? Yes No If yes, please explain _____
- Have you noticed any lumps or bumps on your dog? Yes No If yes, please explain _____
- Have you noticed any skin/coat problems on your dog? Yes No If yes, please explain _____
- Check if you have noticed any of the following: Coughing or labored breathing Limping Tiredness/sluggishness
 Increased thirst increased urination Diarrhea Vomiting Other _____
- Does your dog have any behaviors you wish you could change? Yes No
If yes, please explain _____
- Please list any health issues you would like to discuss with the veterinarian. _____

Thank you! Please return this form to the front desk.