

SYMPTOM SURVEY FORM

Owner name _____ Veterinarian _____ DATE _____

Phone # (____) _____

Pet Name _____ Breed _____

AGE _____ SEX M _____ F _____

INSTRUCTIONS: Number the boxes which apply to you with either a 1, 2, or 3
 (1) for **MILD** symptoms (1 or 2 times a month)
 (2) for **MODERATE** symptoms (several times a month)
 (3) for **SEVERE** symptoms (almost constantly)
 Leave the box **BLANK** if it does not apply.

GROUP 1

1 Dry mouth-eyes-nose
 2 Keyed up, fails to calm
 3 Nervous
 4 Unable to relax; startles easily
 5 Obsessive compulsive behavior
 6 Vomits easily w/excitement
 7 Tends toward aggression
 8 Fear biter
 9 Paws sweat readily
 10 High Anxiety
 11 Isolates away from family or pets
 12 Afraid of storms, fire
 13 Cannot adapt easily to changes in the home

GROUP 2

14 Joint stiffness after arising
 15 Eyes or nose watery
 16 Always seems hungry
 17 Eats dirt
 18 Couch potato like attitude
 19 Constipation, diarrhea alternating
 20 Slow starter, slow mover
 21 Circulation poor, sensitive to cold
 22 Subject to respiratory infection
 23 Sleeps more than used to
 24 Not interested in much of anything including food

GROUP 3

(A)
 25 Trembles, episodes of weakness
 26 Seizures
 27 Disoriented
 28 Increased water consumption
 29 Urinating frequently, large amount
 30 Hungry often
 31 Change in appearance of eyes
 32 Weight loss
 33 Behavior changes

(B)
 34 Increased sleeping
 35 Decreased activity level
 36 Wheat, rice, corn in diet
 37 Overweight
 38 Cannot lose weight with diet
 39 Appetite varies
 40 Eats feces
 41 Passes a lot of gas

GROUP 4

42 Exercise intolerance
 43 Significant muscle mass loss
 44 Fainting, collapse
 45 Cough, especially at rest
 46 Disoriented
 47 Swelling in rear legs
 48 Abdominal enlargement
 49 Rear legs tremble, weak
 50 History of heartworms
 51 Difficulty breathing, shortness of breath

GROUP 5

(A)
 52 On meds along time
 53 Stool watery or diarrhea
 54 Appears bloated
 55 Recent onset of allergies
 56 Seizures, tremors
 57 Change in appetite
 58 Stands with back arched
 59 Elevated cholesterol, lipase, triglycerides
 60 Lethargic, depressed, restless
 61 Frequent anesthetics, multiple surgeries

(B)
 62 Increased shedding
 63 Food sensitivities
 64 Ocular discharge
 65 Red eyes or ears
 66 Swollen or puffy eyes
 67 Itching or squinting eyes
 68 Anal sac problems
 69 Rubs at ears or face
 70 Scooting
 71 Licks or chews at feet or anus
 72 Crusty lip sores
 73 Red tummy
 74 General itchiness
 75 Gas
 76 Sporadic vomit/diarrhea

GROUP 6

- 77 Vomits after fatty meal
- 78 History of pancreatitis
- 79 Middle aged female
- 80 Halitosis
- 81 Recurrent diarrhea
- 82 Intermittent vomiting
- 83 Pale colored stool
- 84 Rancid odor to stool
- 85 Poor coat
- 86 Stomach distress common

GROUP 7

(A)

- 87 Hyperactive
- 88 Weight loss
- 89 Increased skin temperature
- 90 Racing heart

(B)

- 91 Increased shedding
- 92 Thinning, sparse coat, bald spots
- 93 Warts
- 94 Dry, scaly skin
- 95 Oily greasy coat
- 96 Weak pulse
- 97 Elevated blood cholesterol
- 98 Cold intolerant, like warm
- 99 Fatty Tumors
- 100 Depression, mentally dull
- 101 Exercise intolerant
- 102 Back/neck problems
- 103 Increased pigment to eyes
- 104 Obese or can't lose weight
- 105 Stiff gait
- 106 Dry eyes, change in eyes
- 107 Weak knee ligaments

(C)

- 108 Failing memory
- 109 Abnormal thirst
- 110 Weight gain around rear end
- 111 Neutered male retains sexual activity
- 112 Abnormal heat cycles of intact females
- 113 Intact female; no heat cycle

GROUP 7 (continued)

(D)

- 114 Excessive water consumption
- 115 Increased urination
- 116 Abnormal urination
- 117 Thin skin
- 118 Panting all the time
- 119 Respiratory distress
- 120 Lethargic
- 121 Change in behavior
- 122 Pacing
- 123 Muscles weak
- 124 Distended abdomen
- 125 Weak knees
- 126 Decline in arthritic symptoms

(E)

- 127 Weakness
- 128 Depression
- 129 Slow heart
- 130 Intermittent anorexia
- 131 Weak pulse
- 132 Collapse
- 133 Intermittent vomiting/diarrhea

GROUP 8

- 134 Older dog
- 135 Difficulty getting and down
- 136 History of knee or hip surgery
- 137 Arthritic, degenerative joint disease
- 138 Back or disc problems
- 139 Losing muscle tone in legs or back
- 140 Has had ligaments damaged
- 141 Healing fracture in body
- 142 Bone spurs or enlarged joints
- 143 Suffering from a sprain or strain
- 144 Rapidly accumulates tartar on teeth

GROUP 9

- 145 Abnormal/frequent urination
- 146 History of bladder infections
- 147 Kidney disease
- 148 Licking at penis or vulva
- 149 History of bladder stones
- 150 Leaking urine
- 151 Painful urination
- 152 Wants to go outside more often

GROUP 10

- 153 Increased shedding
- 154 Itching
- 155 Red bumps to skin
- 156 Scabs or crust to skin
- 157 Dandruff, flaking
- 158 Body or ear odor
- 159 Skin crawls
- 160 Poor fur quality
- 161 Sores on skin
- 162 Changed skin appearance
- 163 Frequent infections
- 164 Rubs at ears
- 165 Moisture under legs
- 166 Goey ears

- 167 Shakes head
- 168 Repeatedly takes prednisone
- 169 Odor that returns shortly after bath

IMPORTANT

TO THE PATIENT: Please list below the five main physical and or health complaints for this pet in order of their importance:

1. _____
2. _____
3. _____
4. _____
5. _____

other comments: