



Date:

Name:

Address:

Animals Name:

What are you concerned about with your animal?

What symptoms are you noticing?

When did you first notice these symptoms?

When did your animal last seem his/her normal happy self?

*For the following questions please circle or type the relevant option, and give details including how long you have been noticing these signs for:*

Weight: **Gain/Normal/Loss/Unsure:**

Eating: **More/Normal/Reduced/Not eating:**

Drinking: **More/Normal/Reduced/Not Drinking:**

Vomiting: **Y/N** (please give frequency and contents):

Diarrhoea: **Y/N** (please describe frequency, consistency and colour):

Coughing: **Y/N** (please describe cough and when worst):

Limping: **Y/N** (include which leg/s, how severe and when the limp is worst):

Signs of pain: **Y/N** (severity, where):

Are there any medications you know your animal is allergic to or does not tolerate well?

Are you able to give your animal tablets?

Is your animal insured?

Please write any other notes or comments you may have below:

*Wishing you and your animals all the very best in these difficult times.*