

Pet's Full Name _____ Age _____ Breed _____

Home Phone _____ Address _____

- Female Intact
- Female Spayed
- Male Intact
- Male Neutered

Please review the information above and make any corrections needed, then answer the questions below.

- Does your pet have health insurance? Yes No
- Is your cat microchipped? Yes No
- May we contact you by e-mail? Yes No
- Is your cat the best cat in the whole world? Yes No

If yes, please provide your email address. _____

Diet

My Cat Eats (mark all that apply):

- Dry food (brand) _____
- Canned or Semi-Moist Food (brand) _____
- Treats (brand) _____
- People food (type) _____

My Cat (mark all that apply):

- Will only eat canned food
- Will only eat dry food
- Is always begging for food
- Is a picky eater
- Will eat most types of cat food

Lifestyle (This helps us determine risk for parasites, viruses and other infectious diseases)

My Cat (mark the choice that applies best to your cat):

- Is always inside and never sneaks outside
- Is mostly inside, but occasionally goes/sneaks outside
- Goes inside and outside
- Is always outside

My Cat (mark the choice that applies best to your cat):

- Never comes in contact with other cats
- Only comes in contact with the cats in our household
- May come in contact with cats other than in our household

How many cats are in your household including this cat? _____

If there are other cats in your household, do they go/sneak outside? Yes No

Approximately 65% of cats can become infected with heartworms, which are transmitted by mosquitoes.

My Cat (mark the choice that best applies to your cat):

- Probably is bitten by mosquitoes
- Could occasionally be bitten by mosquitoes when they get in our home, porch or patio
- Is never bitten by mosquitoes

Parasites

Have you seen either of these on your pet within the last year?

- Fleas
- Ticks
- Neither

Health Problems

Which best describes your pet's mouth?

- Great
- Some calculus (tartar)
- Some calculus (tartar) and red gums
- Really bad odor
- I never look

Please mark the conditions that apply to your pet: Normal (no problems)

- Vomiting
- Limping
- Behavioral changes
- Itchy skin
- Difficulty jumping
- Hearing problems
- Skin lumps and bumps
- Decreased appetite
- Vision problems
- Coughing or sneezing
- Incontinence
- Underweight
- Frequent urination
- Constipation
- Seizures
- Overweight
- Diarrhea
- Litter box problems
- Increased thirst
- Decreased grooming

Comparative Ages of Cats and Humans: This table will help you determine if your pet is senior or super senior by showing your cat's relative age in human years. Please circle your pet's "human age"

.Cat Age (Years)	Human Age (Years)	Cat Age (Years)	Human Age (Years)
1	15	13	68
2	24	14	72
3	28	15	76
4	32	16	80
5	36	17	84
6	41	18	88
7	45	19	92
8	49	20	96
9	53	21	100
10	57	22	104
11	61	23	108
12	64	24	111

If your cat is receiving a vaccination by injection today, please read this paragraph and sign below: A small amount of cats develop a non-painful lump under the skin after they are vaccinated. The vast majority of these lumps disappear spontaneously without treatment. However, on rare occasions (approximately 1 to 10 in 100,000 cats), a potentially serious growth can arise in the area of the vaccination. Should you notice a lump in the area of a vaccination at any time, please do not hesitate to bring your pet in for a no charge examination. Your peace of mind is very important to us. Please feel free to discuss this or anything else that you think may affect the health or happiness of your pet with our practice team.

Thank you for helping us keep your cat healthy!

X _____
Client Signature

Date ____/____/____