



SMALL MAMMAL
Your Pet's Medical Information & History
Erlanger Veterinary Hospital



Owner's Name:	Pet's Name:
Account #:	Date:

Reason for today's visit: _____

Have you been to our satellite office, Union Pet Clinic, recently? _____

INSTRUCTIONS: Please circle YES or NO (Explain on lines if needed)

Has your address, home, cell, or work telephone numbers changed since your last visit? **NO/YES**

If yes, please specify any changes: _____

What is your E-mail Address? _____

Are you interested in Pet Insurance? **NO YES:** _____

Has your pet had any recent medical problems? **NO YES:** _____

Does your pet have any chronic medical problems? **NO YES:** _____

Does your pet have any allergies? (If yes, to what?) **NO YES:** _____

Do you plan on boarding your pet? **NO YES:** _____

Is your pet micro-chipped? **NO YES:** _____

Is your pet currently on any medications? (If yes, List) **NO YES:** _____

Where & when did you acquire your pet? _____

What type of cage & bedding are you using? _____

Where is the cage located? _____

How much time is spent outside the cage? _____

What is your pet's diet? _____

How much/often are you feeding? _____

Has your pet been tested for intestinal parasites in the past 12 months?(Fecal exam) **NO YES**

Has your pet shown any of the following signs or symptoms? If yes, please circle the symptom

- | | | |
|--------------------|-------------------|-------------------|
| UNUSUAL BODY ODORS | SHAKING HEAD/EARS | UNUSUAL DISCHARGE |
| COUGHING | SNEEZING | WHEEZING GAGGING |
| ITCHING | HAIR LOSS | SKIN PROBLEMS |
| VOMITING | DIARRHEA | LUMPS/BUMPS |
| LIMPING | LAMENESS | STIFFNESS |
| | | LISTLESS |
| | | TREMORS/SEIZURES |
| | | POOR HAIR COAT |
| | | PANTING WEAKNESS |

Has your pet shown significant change in any of the following?

Character of bowel movements?	YES NO	Appetite?	YES NO
Frequency or amount of urination?	YES NO	Drinking?	YES NO
Weight gain or loss?	YES NO	Behavior?	YES NO

EPR CLIENTS: If your pet is visiting us from the Pet Resort, please leave a number where the veterinarian can contact you after your pet has been examined. _____