



Client's Name:  Pet's Name:

Phone:  Email:  Date:

Yes                      No

- 1. Has your puppy been eating well?  Yes                       No
- 2. Is house training going well??  Yes                       No
- 3. Is your puppy's activity level normal?  Yes                       No
- 4. Is your puppy sneezing or coughing?  Yes                       No
- 5. Has there been any diarrhea or vomiting?  Yes                       No
- 6. Do you know of any problems with any littermates?  Yes                       No

7. What type of food does your puppy eat and how often?

- 8. Has your puppy had any recent surgery?  Yes                       No
- 9. Are there any flea or tick problems?  Yes                       No

10. What flea/tick preventative are you using for your puppy?

- 11. Has your puppy started heartworm preventative?  Yes                       No
- If so, what heartworm preventative are you using and when?

12. Has there been any medical treatment or vaccines at another veterinary clinic, shelter, or breeder?  Yes                       No

- 13. Does your puppy have a breeder guarantee?  Yes                       No
- If so, is there anything you need from us today to complete the conditions of the guarantee?

14. Is there anything else we should know about your puppy's health?

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