

Related animals/In contacts/Pet Parents:

How long has the Referred Pet been part of the family:

Origin - where is he/she from: KC Breeder / Hobby-bred / Rescued / Re-Homed / Born at home

What is the Health of all the Litter Mates & Parents:

Any other Pets at Home (*any skin issues at all?*): Y/N

Do any close Human Contacts have any skin issues/compromised immunity? Y/N

Are any household members Health Care Workers: Y/N

Behaviour: Good / Nervous / Aggressive / Kennel Guarder

Any Smokers at Home: Y/N

Lives Indoors? (*where*): Whole house/Downstairs only Bed (*what & where*):

Outdoor/Exercise (*where*):

How Long Resident at Current Address: Any Recent/Current Redecorating: Y/N

Travel Abroad (*any owned pets, where, when, within last 7 years*):

Boarding/Day Care: Y/N

Pet-sitter/Walker: Y/N

Groomer (*visits & treatments given*): Y/N Washing Products used: Vet/Groomer/Unknown
Ear Hair Plucking: Y/N

Main Past & Present Oral & Topical Treatments:

(*current or past drug, dose, frequency, duration, compliance, response to treatment, side effects*)

Drug 1:

Drug 2:

Drug 3:

Drug 4:

Drug 5:

Drug 6:

Any Known/Suspected Drug Sensitivities/Reactions:

Additional Comments: