



PUPPY/KITTEN QUESTIONNAIRE

Owner's Name: _____ Date: _____

Address: _____ Postal Code: _____

Phone numbers: (home): _____ (cell): _____ (work): _____

Which of the above numbers do you prefer as primary contact number? _____

E-mail: _____

Emerg. Contact (other than immediate family): _____ Ph: _____

Pet's Name: _____ Breed: _____ Colour: _____

Sex: _____ Age or Birthday: _____

PLEASE BRING A FECAL SAMPLE TO YOUR APPOINTMENT

What date did you obtain your pet? _____

How old was your puppy/kitten when you obtained him/her? _____

Where did you obtain your pet? (private home, pet store, breeder, shelter or humane society, rescue group, other)?

What veterinary care has your pet received so far? Please bring documentation if you have it.

Vaccinations: _____ Dates given: _____

Deworming: _____ Dates given: _____

Name of deworming medications, if known: _____

What diet are you currently feeding your pet?

Dry kibble: _____

Canned food: _____

Treats: _____

If you know what diet your pet was fed prior to adopting him/her, please note it here.

How often is he/she fed? _____

Is food available all the time or at set "mealtimes"? _____

Where does your puppy/kitten spend most of his/her day?

- inside outside in a room in a kennel with you

Do you have other pets? YES/NO (if no, skip to next question)

a) Are they in contact with the puppy/kitten?

YES NO

b) Are the other pets currently vaccinated?

YES NO Not applicable

c) Are they currently on heartworm and flea/tick preventive medications?

YES NO

Are there any specific health issues you wish to discuss?

YES NO

Are there any other issues you wish to discuss?

For dogs:

How would you describe your puppy's house training?

Great, not having any accidents

Good, a few accidents still but most of the time controlled

So-so, having several accidents a day

Not a clue, most elimination is happening in a location I do not prefer

Comments: _____

Is your puppy being housetrained to go

Outdoors only

Pee pads or mats inside as well as outdoors

Indoors only

How is your dog kept when you leave him/her alone?

Free in house

crate (location in house?) _____

behind a gate or door in house

Where do you plan to exercise your dog?

Dog parks –off leash

local neighbourhood walks/parks

home property

indoors only

Do you expect to be taking your dog to

grooming facilities

boarding kennels

obedience schools

seniors homes or hospital visits

USA or other countries

Will your dog travel with you to vacation locations (cottages, etc). If so, where? (what geographic location specifically?)

Have you enrolled your puppy in a puppy socialization class? YES NO

If so, where? _____

Have you seen any fleas or ticks on your puppy? YES NO

For cats:

Do you plan to allow your cat outdoors? YES NO

If yes, do you expect your cat will be...?

- On leash
- In enclosed location (crate, 'catio', pen)
- free to roam

Where is the litter box located? _____

What type of litter are you currently using?

- Clumping litter
- paper pellets
- silica based crystals
- corn/wheat/nut shell litter
- non clumping clay litter

Is the litter scented or unscented? _____

Is the kitten using the box consistently (without 'accidents')? YES NO