

SENIOR DOG QUESTIONNAIRE

As your dog is now into the senior years we would like you to take a few minutes to fill in this questionnaire and bring it with you to the vaccination check up now due.

Geriatric years for a dog are usually defined as 8 years or age or older (6 for larger breeds).

Please bring a sample of your dog's urine with you in a clean container. This can be kept in the fridge if collected up to the day before you visit us. Please note this urine test is included in the cost of the vaccination.

DOES YOUR DOG.....

1. exhibit any signs of discomfort rising, walking or jumping or tire easily?

2. ever cough for extended periods? If so what seems to set the cough off?

3. ever have diarrhea or constipation?

4. drink or urinate more than usual *; or urinate in inappropriate places?

5. have bad breath, have difficulty eating, ever have bleeding from the mouth?

6. seem to have eye or eyesight problems?

7. have any ear problems or seem to be going deaf?

8. have any or these signs (*please tick*) wander aimlessly bark for no reason seem less responsive to family members less enthusiastic about walks etc have a confused sleeping pattern or loss of housetraining

9. have any skin changes including hair loss; lumps in or under the skin; itchy areas or lumps that bleed?

10. appear to have put on or lost weight in the last 12 months? How much? _____

What does your dog eat and is there a regular exercise routine?

DIET:.....

EXERCISE:.....

* if increased please phone for instruction on how to do a 24 hour water intake assessment.