

Bay Cities Veterinary Hospital

Dog/Cat Owner History

	Pet 1	Pet 2	Pet 3
Pet Name			
Sex			
Spayed or Neutered			
Date of Birth			
Age of pet when acquired			
Species (cat, dog)			
Breed			
Color/markings			
LAST DATE OF VACCINATION OR TEST (IF KNOWN)			
DHPP (Distemper-Parvo Combo-dog)			
Bordetella (dog)			
Feline Distemper & Resp (cat)			
Feline Leukemia Test (cat)			
Feline Leukemia Vaccine (cat)			
Rabies (cat & dog)			
Heartworm Test			
Fecal Check (worms & parasites)			
Dentistry			
List Current Medications			
(name dose and frequency if known)			
Known Drug Allergies			
Diet consists of			
Prior illnesses or surgeries			
Total hrs outside per day			
Additional Comments/Notes			