



Beth Hamper, DVM, PhD, DACVN
VCA Advanced Veterinary Care Center 7712 Crosspoint Commons
Fishers, IN 46038
Beth.hamper@vca.com

Please answer the following questions regarding your Pet

Date _____ Pet's Name _____

Breed _____ Date of Birth _____

Gender _____ Neutered/spayed No Yes

1. Is your pet housed: Indoor Outdoor Both

2. Please describe your pet's activity level (i.e. type, duration & frequency): _____

3. Do you have other pets? Yes No If yes, please list: _____

4. Does your pet have access to other pet's foods? Yes No If yes, please describe:

5. Is food left out for your pet during the day or taken away after the meal?

6. Does your pet have access to other unmonitored food sources (i.e. food from a neighbor, dog food etc.)? Yes No If yes, please describe:

7. Who typically feeds your pet? _____

8. How do you store your pet's food? _____

9. Please list your pet's **current and past medical problems**, if any, and whether they have resolved:

10. Please list all **medications** your pet is currently receiving and any administered over the past three months (indicate those that are current):

11. How do you **administer medications and supplements** to your pet? If foods such as peanut butter or Pill Pockets are used, please estimate amounts fed per day.

12. Have you made any recent changes in the diet (i.e. the last 4 weeks)? No Yes
If yes, please describe what the change was and why you made it _____

13. Current Diets

Please list below the brands and product names (if applicable) and amounts of ALL foods, treats, snacks, dental hygiene product, and any other foods that your pet is **currently** eating. **Please separate out each ingredient in a home-cooked diet, listing each ingredient on its own line.**

This description should provide enough detail that we could go to the store and purchase the food. It should include human foods given as treats or at the table. Examples given in italics.

Brand name	Food/Variety	Form/how cooked	Amount <i>*per meal*</i>	# of meals per day	Fed since
<i>"X" Brand</i>	<i>Chicken breast, skinless, boneless</i>	<i>baked</i>	<i>50 grams</i>	<i>3 times per week</i>	<i>May 2011</i>
<i>Purina</i>	<i>Pro Plan Focused Adult Balanced Energy</i>	<i>dry</i>	<i>½ cups</i>	<i>Twice a day</i>	<i>June 2010</i>

Please list the name of each **additional supplement** your pet receives, indicate how much and how often your pet receives it (i.e. herbal product, fatty acid, vitamin or mineral supplement): _____

14. Previous Diets and Supplements

Please list other diets, treats, and supplements your pet has received **in the past**, indicating the approximate time period when they were fed. *An example is given in italics.* A detailed diet history of both commercial and homemade foods is particularly important if requesting novel protein diets.

Brand Name	Product/Variety	Form	From	To	Reason stopped
<i>"X" Brand</i>	<i>Kitten formula</i>	<i>canned</i>	<i>June 2011</i>	<i>March 2012</i>	<i>Became an adult</i>

15. Please indicate whether your pet has experienced any of the following:

- Recent involuntary or unintended **weight change**:
 - weight gain **OR** weight loss How much? _____kg or lb.
 - Over what time period? _____
- Vomiting**: _____ times/day _____ times/week. Over what time period? _____
- Diarrhea**: _____ times/day _____ times/week. Over what time period? _____

16. Have you observed changes in any of the following:

- Urination **OR** Drinking What was the specific change? _____
- Since when? _____
- Defecation What was the specific change? _____

Since when? _____

Appetite What was the specific change? _____

Since when? _____

17. Does your pet have? allergies **OR** difficulty chewing swallowing

If so, please describe: _____

18. Pet dietary preferences and restrictions: (What ingredients will/can your pet eat?)

Please fill out this section if a home-cooked diet formulation is being requested or may be needed. **If diet formulation is needed due to an adverse reaction to food(s), please provide us with some options of protein and carbohydrate sources that are both palatable AND tolerated by your pet.** This will need to be determined prior to submitting this consult request.

If you have specific personal preferences or have found that your dog does not tolerate specific foods, please let us know.

Protein sources

Carbohydrate sources

- | | | | |
|------------------------------------|----------------------------------|--|---|
| <input type="checkbox"/> beef | <input type="checkbox"/> pork | <input type="checkbox"/> barley | <input type="checkbox"/> potato, white |
| <input type="checkbox"/> chicken | <input type="checkbox"/> salmon* | <input type="checkbox"/> millet | <input type="checkbox"/> quinoa |
| <input type="checkbox"/> whitefish | <input type="checkbox"/> venison | <input type="checkbox"/> oatmeal | <input type="checkbox"/> rice, brown |
| <input type="checkbox"/> rabbit | <input type="checkbox"/> tuna* | <input type="checkbox"/> pasta | <input type="checkbox"/> rice, white |
| <input type="checkbox"/> egg | <input type="checkbox"/> turkey | <input type="checkbox"/> green peas | <input type="checkbox"/> pumpkin |
| <input type="checkbox"/> lamb | <input type="checkbox"/> duck | <input type="checkbox"/> potato, sweet | <input type="checkbox"/> polenta (corn) |

other: _____

***These ingredients may contain high levels of mercury - not recommended for long-term feeding.**

19. Contact

May we contact you in a few weeks after starting the new diet to see how your pet is doing?

No Yes

Please read and review the recipe template prior to submitting this consult request.

