



Hart Road Animal Hospital

Annual Examination Report



CHART:
PATIENT:

Previous Medical Problems, Allergies, & Vaccine Reactions:

Current Diet: How much per day?

Current Medications (if any):

Please check the appropriate boxes below. We strongly encourage you to share any concerns or unusual symptoms your pet may be experiencing with your veterinary technician and on-duty Veterinarian.

- Lifestyle Indoors Only Outdoors Only Indoors & Outdoors
- Water Intake Normal More than Normal Less than Normal
- Appetite Excellent Good Poor Very Poor
- Vomiting & Diarrhea None/Rarely Occasionally Frequently
- Bathroom Habits Normal Diarrhea Straining Change in Frequency Accidents
- Respiratory Issues None Occasionally Frequent
- Skin & Ear Issues None Seasonal Year-round
- History of Fight Wounds Yes No
- Activity Level Normal Less than Normal More than Normal
- Behavior Normal Abnormal
- Lumps & Growths Yes No Unsure
- Lameness or Limping Yes No
- Fleas or Ticks Noticed Yes No
- Monthly Parasite Control Frontline Revolution Sentinel Heartguard None Other _____
- Microchip identification Yes No Unsure
- Dental Care Cleanings Tooth Brushing Dental Treats Oral Care Products None

Has <animal> ever had the following lab tests?

- Heartworm Test Yes No Unsure
- Fecal Exam for Parasites Yes No Unsure
- Feline Leukemia (Cats only) Yes No Unsure
- FIV – Feline AIDS (Cats only) Yes No Unsure
- Blood Work or Urinalysis Yes No Unsure