

# Avondale Haslet Animal Clinic, Inc.

1321 Avondale Haslet Road, Bldg. A  
Haslet, TX 76052  
817-439-5252  
817-439-8476 (fax)



Your pet is here today for their annual physical and scheduled vaccinations. In order to provide the best possible care we would ask that you take a few minutes to answer the following questions.

Today's Date \_\_\_\_\_

Your name \_\_\_\_\_

Pet's name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone number(s) Home \_\_\_\_\_ Work \_\_\_\_\_

Cell \_\_\_\_\_ Other \_\_\_\_\_

E-mail \_\_\_\_\_

Has there been a notable change in weight? Yes No

Has there been a change in water consumption or urine output? Yes No

Has there been any coughing or sneezing? Yes No

Do you hear any wheezing? Yes No

Is there any exercise intolerance, lameness, or muscle weakness? Yes No

Has there been a problem with itchy skin? Yes No

Have you noticed hair loss? Yes No

Have you noticed any flea or tick problems? Yes No

Have there been any changes in vision or hearing? Yes No

Have there been any changes in stool? Yes No

Have you noticed bad breath? Yes No

**Continue to the back, please!**

Has there been a change in appetite? Yes No

Has there been any vomiting? Yes No

Have you found any new lumps or bumps? Yes No

Have there been any changes in sleep patterns? Yes No

Have there been any changes in vocalization? Yes No

Please specify any other concerns you may have about your pet you would like to discuss with the doctor.

---

---

---

---

Would you like us to perform laboratory tests to evaluate for problems that are not seen upon physical examination? This will look at blood counts and major organ systems (liver, kidney, and thyroid). These would be optional tests with an additional charge, but are strongly recommended particularly for pets over 5 years of age. Yes No

Signature \_\_\_\_\_