

## Small Mammal Questionnaire

Client Name: \_\_\_\_\_

Pet Name: \_\_\_\_\_

Type of Pet: \_\_\_\_\_

**Reason for Visit:** (please check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Pre-purchase exam           | <input type="checkbox"/> Not eating/eating less                     |
| <input type="checkbox"/> Post-purchase exam          | <input type="checkbox"/> Change in quantity or consistency of stool |
| <input type="checkbox"/> General health check        | <input type="checkbox"/> Sores or swelling around mouth             |
| <input type="checkbox"/> Yearly check-up             | <input type="checkbox"/> Teeth protruding from mouth                |
| <input type="checkbox"/> Hair loss or sores          | <input type="checkbox"/> Difficulty eating                          |
| <input type="checkbox"/> Discharge from eyes or nose | <input type="checkbox"/> Excessive salivation                       |
| <input type="checkbox"/> Coughing/sneezing           | <input type="checkbox"/> Distended abdomen/bloated                  |
| <input type="checkbox"/> Difficulty breathing        | <input type="checkbox"/> Ear problems                               |
| <input type="checkbox"/> Lameness                    | <input type="checkbox"/> Eye problems                               |
| <input type="checkbox"/> Lethargy/weakness           |   |
| <input type="checkbox"/> Other _____                 |   |

How long have you noticed these signs? \_\_\_\_\_

How long have you owned your pet? \_\_\_\_\_

Where did you obtain your pet (pet store/friend/breeder)? \_\_\_\_\_

Is your pet housed alone or with a cage mate? \_\_\_\_\_

What do you feed your pet? \_\_\_\_\_

How often do you feed him/her? \_\_\_\_\_

Briefly describe the cage he/she lives in:

- Wire bottom
- Solid flooring
- Aquarium
- Has place to hide
- Other \_\_\_\_\_

What bedding or substrate do you use at the bottom of the cage? \_\_\_\_\_

What is your pet's source of water?  Bowl  Bottle

Is he/she actively drinking from this source? \_\_\_\_\_