

**New Patient Avian Information Form**

Please fill out the following form in as much detail as possible

Where was your bird obtained? \_\_\_\_\_

How long has your bird been in your possession? \_\_\_\_\_

Was your bird wild-caught or captive-bred? \_\_\_\_\_

What diet is your bird on? Please include brand name, main components of the diet, any fruits or vegetables your bird receives, and any commercial treats or human food; please include frequency with which food and treats are offered. \_\_\_\_\_

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What are the dimensions of your bird's cage? Include height, width, and depth. \_\_\_\_\_

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What are the perches made of? \_\_\_\_\_

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Is there a nest box in the cage? \_\_\_\_\_

Where in the house is the cage located? Is this a high-traffic area of your home? \_\_\_\_\_

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Does your bird go into a separate cage at night? \_\_\_\_\_

What is your bird's "bedtime?" \_\_\_\_\_

What time does your bird wake up? \_\_\_\_\_

How much time does your bird spend outside the cage daily? \_\_\_\_\_

How much time does your bird spend interacting with you daily? \_\_\_\_\_

Is your bird allowed to fly? If so, where and how often? \_\_\_\_\_

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Are there any other birds in your home? If so, how many, what species, and do they share a cage, room, or play space? \_\_\_\_\_

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How often do new birds come into your home? \_\_\_\_\_

Has your bird been seen sneezing, "snicking," coughing, wheezing, or has your bird experiences a change in voice in the past two weeks? If so, please describe in detail. \_\_\_\_\_

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Please describe your bird's stools for the past two weeks. \_\_\_\_\_

Has your bird's appetite been normal, increased, or decreased in the past two weeks? \_\_\_\_\_

\_\_\_\_\_

Has your bird been seen sitting "fluffed," or has your bird been less social than usual in the past two weeks? \_\_\_\_\_

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