

Canine Health and Diet Questionnaire

Please answer the following questions to the best of your ability.

I. General Information:

1. Dog's Name:
2. Breed (or primary breed mix):
3. Age:
4. Weight (approximate):
5. Sex: Male / Female
 - a. Neutered / Spayed: yes / no
6. Any other general info to share:

II. Current Diet:

1. What type of food are you currently feeding your dog?
 - o Dry kibble (specify brand and formula):
 - o Wet food (specify brand and formula):
 - o Raw food (describe):
 - o Home-cooked (describe):
 - o Other (specify):

2. How often do you feed your dog per day?
3. How much food do you typically feed at each meal? (e.g., cups, cans, etc.)
4. Do you give your dog treats?
 - Yes (please specify type/Brand and frequency):
 - Review the ingredients
5. Do you give your dog any supplements?
 - Yes (specify which ones):
 - No
6. Does your dog ever eat "human food" not meant for a canine, other than meat/organ/bone.
 1. If so, what kind and how often?

III. Health History:

1. Does your dog have any known allergies or sensitivities (food or environmental)?
 - Yes (please specify):
 - No

2. Does your dog have any current or past medical conditions?
 - Yes (please specify):
 - No

3. When was your dog's last veterinary check-up and blood work?
 1. Any areas of concern?

4. Do you do yearly vaccinations?
 - Yes – please list last, date, type, frequency

 - No

5. Is your dog currently taking any medications or any "prescription" flea med
- Yes (please specify):
 -
 - No

IV. Observations:

1. What is your dog's current energy level?
 - High
 - Moderate
 - Low

2. How would you describe your dog's appetite?
 - Good
 - Fair
 - Poor
 - Excessive

3. Are your dog's stools typically:

- Firm
- Soft
- Runny
- Other (please describe):

4. Does your dog have any issues with:

- Skin or coat (e.g., itching, dryness, hair loss)? Yes / No
(if yes, please describe):
- Digestion (e.g., vomiting, diarrhea, gas)? Yes / No
(if yes, please describe):
- Weight (underweight, overweight)? Yes / No
(if yes, please describe):
- Other:

5. Is there anything else you think I should know in review?

Thank you for taking the time to answer these questions!