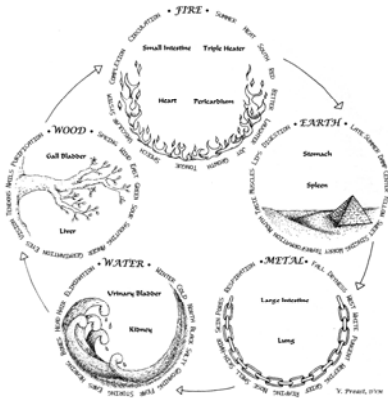


# Pet Personality & Clinical Signs

Owner Information			
<b>Name</b>		<b>Telephone</b>	
		<b>Email</b>	
<b>Address</b>			
Animal Information		Name	Species
<b>Sex</b>	<input type="checkbox"/> Intact	<b>Age</b>	<b>Weight</b>
<b>Current Medication</b>			
<b>Major Complaints</b>			
<b>Current Diet/Food</b>			



Fire	
Balanced	Unbalanced
<input type="checkbox"/> lively <input type="checkbox"/> playful <input type="checkbox"/> communicative <input type="checkbox"/> very friendly, or affectionate <input type="checkbox"/> loves to be petted <input type="checkbox"/> center of the party <input type="checkbox"/> sensitive <input type="checkbox"/> normal mental activity <input type="checkbox"/> "The emperor"	<input type="checkbox"/> insomnia <input type="checkbox"/> separation anxiety <input type="checkbox"/> restlessness or hyperactive <input type="checkbox"/> mental disturbance <input type="checkbox"/> too noisy <input type="checkbox"/> crazy ("naked dance on roof") <input type="checkbox"/> heart problems <input type="checkbox"/> tongue ulceration <input type="checkbox"/> scared without reason



Wood	
Balanced	Unbalanced
<input type="checkbox"/> decisive, or competitive <input type="checkbox"/> assertive, or confident <input type="checkbox"/> dominant, or aggressive <input type="checkbox"/> strong, fearless <input type="checkbox"/> impulsive, hasty <input type="checkbox"/> athletic-stamina <input type="checkbox"/> alpha animal <input type="checkbox"/> pioneer spirit <input type="checkbox"/> "The general"	<input type="checkbox"/> ligament or tendon problems <input type="checkbox"/> liver problems <input type="checkbox"/> red eyes <input type="checkbox"/> irritable or angers easily <input type="checkbox"/> ear problems <input type="checkbox"/> nail problems <input type="checkbox"/> footpad, or foot problems <input type="checkbox"/> anal sac issues <input type="checkbox"/> seizure activity

Earth	
Balanced	Unbalanced
<input type="checkbox"/> relaxed, laid back <input type="checkbox"/> friendly, loyal <input type="checkbox"/> round and large <input type="checkbox"/> slow and consistent <input type="checkbox"/> serene and balanced <input type="checkbox"/> cares for others (motherly) <input type="checkbox"/> normal bowel activity <input type="checkbox"/> good appetite, easy-keeper <input type="checkbox"/> "The mother"	<input type="checkbox"/> diarrhea <input type="checkbox"/> constipation <input type="checkbox"/> loss of appetite <input type="checkbox"/> vomits <input type="checkbox"/> colic or abdominal pain <input type="checkbox"/> gum or lip disease <input type="checkbox"/> weak muscles <input type="checkbox"/> overeats-obese <input type="checkbox"/> excessive worrier

Water	
Balanced	Unbalanced
<input type="checkbox"/> careful <input type="checkbox"/> timid, shy <input type="checkbox"/> fearful <input type="checkbox"/> self contained <input type="checkbox"/> hides or runs away <input type="checkbox"/> meditative/good observer <input type="checkbox"/> long life span <input type="checkbox"/> strong teeth and bones <input type="checkbox"/> "Good observer"	<input type="checkbox"/> hind end weakness <input type="checkbox"/> withdrawn <input type="checkbox"/> arthritis or disk disease <input type="checkbox"/> urinary problems <input type="checkbox"/> kidney problems <input type="checkbox"/> disturbed growth <input type="checkbox"/> deafness, bad teeth <input type="checkbox"/> reproductive problems <input type="checkbox"/> premature ageing

Metal	
Balanced	Unbalanced
<input type="checkbox"/> loves order <input type="checkbox"/> obeys the rules <input type="checkbox"/> aloof, quiet <input type="checkbox"/> independent <input type="checkbox"/> symmetrical body <input type="checkbox"/> disciplined attitude <input type="checkbox"/> good haircoat <input type="checkbox"/> "Good organizer"	<input type="checkbox"/> dry skin <input type="checkbox"/> sinus problems <input type="checkbox"/> nasal discharge or congestion <input type="checkbox"/> asthma <input type="checkbox"/> breathing difficulty <input type="checkbox"/> cough <input type="checkbox"/> upper airway or lung infection <input type="checkbox"/> weak voice <input type="checkbox"/> excessive sadness or grief