Great Falls Animal Hospital

Special Senior Wellness Program

Orthopedic	
Any change in attitude or activity level?	Y or N
Does your pet limp or appear stiff? Have difficulty rising or reluctant to climb stairs, or trouble jumping?	Y or N
Have you ever given medication for pain? Such as aspirin, or supplements? If so list:	Y or N
Body Function	
Any change in appetite?	Y or N
Any vomiting?	Y or N
Any change in water consumption?	Y or N
Any change in stools? Diarrhea or constipation	Y or N
Any change in litter box or house training habits? Increased urination? Incontinence?	Y or N
Any change in sleep patterns? Any lethargy or depression?	Y or N
Any vision or hearing problems?	Y or N
Any bad breath or missing/broken teeth?	Y or N
Any scooting?	Y or N
Heart/Lung	
Any coughing or sneezing? Any nasal discharge?	Y or N
Does your pet slow down or tire easily on walks?	Y or N
Neurological	
Any behavior changes? Excessive barking? Less interaction with family? Changes in sleep patterns?	Y or N
Does your pet have a head tilt or is he/she circling? Lack of coordination or disorientation? Confusion?	Y or N
Any panting tremors or shaking? Seizures?	Y or N
Skin & Hair Coat	
Any changes in grooming habits?	Y or N
Any skin or haircoat changes? Itching? Lumps or bumps?	Y or N
Medications & Diet	
Is your pet on heartworm preventative?	Y or N
If so what preventative?	
Are you using any flea/tick preventative?	Y or N
If so what preventative?	
Diet fed: Quantity:	
Other:	