Senior Pet Health Questionnaire

As your pet ages, differences can be subtle. Although senior pets have special needs, you can help make sure they stay healthy by paying attention to their day-to-day habits and activities. This form will help you monitor your senior pet's health and keep track of any changes. Bring it with you to your pet's next veterinary appointment to make sure your pet gets the best possible care!

Please complete the following:

Your name:
Your pet's name:
Breed:
Age (in actual years):
Weight:
Sex: O Female O Male

Please list all medications and supplements your pet currently is taking:

Pet's Actual	Relative Age of Pet in "Human Years"					
Age	0-20 Pounds		21-50 Pounds	51-90 Pounds	Over 90 Pounds	
1 year	7 years		7 years	7 years	-	
2 years	14 yea	rs	16 years	18 years	20 years	
3 years	28 yea	rs	30 years	32 years	34 years	
4 years	32 yea	rs	34 years	36 years	38 years	
5 years	36 yea	rs	37 years	40 years	42 years	
6 years	40 yea	ars	42 years	45 years	49 years	
7 years	44 yea	irs	47 years	50 years	56 years	
8 years	48 yea	rs	51 years	55 years	64 years	
9 years	52 yea	rs	56 years	61 years	71 years	
10 years	56 yea	rs	60 years	66 years	78 years	
11 years	60 yea	irs	65 years	72 years	86 years	
12 years	64 yea	irs	69 years	77 years	96 years	
13 years	68 yea	rs	74 years	82 years	101 years	
14 years	72 yea	rs	78 years	88 years	108 years	
15 years	76 yea	rs	83 years	93 years	115 years	
16 years	80 years		87 years	99 years	123 years	
17 years	84 years		92 years	104 years	-	
18 years	88 years		96 years	109 years	-	
19 years	92 years		101 years	115 years	-	
20 years	96 years		105 years	120 years	-	
Cats are consid	dered	Senior	at 11 - 14 years c	ofage	Senior	
	uereu	Geriat	ric at 15+ years c	of age	Geriatric	

Please note any changes to your pet's health:

Has your pet gained or lo O No change O Lost slightly	O Gained slightly	O Gained significantly
Does your pet have bad I	preath?	
O Yes, frequently.	O Yes, occasionally.	O No.
Has your pet's stool chan O No change O Frequent diarrhea	O Frequent constipation	O Occasional constipation
Have your pet's urination	habits changed?	
O No change		O Less urination
O Increase in volume	O Decrease in volume	
Is your pet interacting no	rmally?	
O No change	O Frequent isolation	
O Occasional isolation	O Needs constant attention	
CONTINUE ON OTHER SIDE		For the LOVE of Senior Pets .



Is your pet grooming normally?						
O No change	O Grooming more	O Grooming less	O Not grooming at all			
How is your pet's skin and coat?						

O No change O Dry O Hot spo

O No change	O Dry	O Hot spots	O Itchy	O Flaky	O Oily	O Losing hair

Please note any changes to your pet's behavior or habits

	No change	Lower/Less	Higher /More	Not applicable/ have not noticed
Sociability	0	0	0	0
Activity level	0	0	0	0
Sleep	0	0	0	0
Eating	0	0	0	0
Water intake	0	0	0	0
Vomiting	0	0	0	0
Responsiveness	0	0	0	0
Vocalization	0	0	0	0
Litter box use	0	0	0	0

Please note your pet's ability to perform the following activities

Walk and move

- O Normal
- O Occasional difficulty
- O Moderate difficulty
- O Significant difficulty
- O Not mobile

Play and engage with toys

- O Normal
- O Occasional difficulty
- O Moderate difficulty
- O Significant difficulty
- O Does not play

Jump up

- O Normal
- O Occasional difficulty
- O Moderate difficulty
- O Significant difficulty
- O Does not jump

Go up steps

- O Normal
- O Occasional difficulty
- O Moderate difficulty
- O Significant difficulty
- O Does not go up steps

Please note any other concerns or questions:

Thank you!

For the LOVE of Senior Pets.

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