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: ☐ Female  ☐ Male  

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

Please note any changes to your pet’s health:
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

<table>
<thead>
<tr>
<th>Has your pet gained or lost weight?</th>
<th>No change</th>
<th>Gained slightly</th>
<th>Gained significantly</th>
</tr>
</thead>
<tbody>
<tr>
<td>O Male</td>
<td>O Female</td>
<td>O Lost slightly</td>
<td>O Lost significantly</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does your pet have bad breath?</th>
<th>Yes, frequently.</th>
<th>Yes, occasionally.</th>
<th>No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Has your pet’s stool changed?</th>
<th>No change</th>
<th>Frequent constipation</th>
<th>Occasional constipation</th>
</tr>
</thead>
<tbody>
<tr>
<td>O Male</td>
<td>O Female</td>
<td>O Frequent diarrhea</td>
<td>O Occasional diarrhea</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Have your pet’s urination habits changed?</th>
<th>No change</th>
<th>Frequent urination</th>
<th>Less urination</th>
</tr>
</thead>
<tbody>
<tr>
<td>O Male</td>
<td>O Female</td>
<td>O Increase in volume</td>
<td>O Decrease in volume</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Is your pet interacting normally?</th>
<th>No change</th>
<th>Frequent isolation</th>
<th>Needs constant attention</th>
</tr>
</thead>
<tbody>
<tr>
<td>O Male</td>
<td>O Female</td>
<td>O Occasional isolation</td>
<td>O Needs constant attention</td>
</tr>
</tbody>
</table>

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Cats are considered Senior at 11 - 14 years of age  
Geriatric at 15+ years of age  

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For the Love of Senior Pets.
Is your pet grooming normally?
- No change
- Grooming more
- Grooming less
- Not grooming at all

How is your pet's skin and coat?
- No change
- Dry
- Hot spots
- Itchy
- Flaky
- Oily
- Losing hair

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

<table>
<thead>
<tr>
<th></th>
<th>No change</th>
<th>Lower/Less</th>
<th>Higher /More</th>
<th>Not applicable/have not noticed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sociability</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Activity level</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Sleep</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Eating</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Water intake</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Vomiting</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Responsiveness</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Vocalization</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Litter box use</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

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

**Walk and move**
- Normal
- Occasional difficulty
- Moderate difficulty
- Significant difficulty
- Not mobile

**Jump up**
- Normal
- Occasional difficulty
- Moderate difficulty
- Significant difficulty
- Does not jump

**Play and engage with toys**
- Normal
- Occasional difficulty
- Moderate difficulty
- Significant difficulty
- Does not play

**Go up steps**
- Normal
- Occasional difficulty
- Moderate difficulty
- Significant difficulty
- Does not go up steps

Please note any other concerns or questions:
__________________________________________________________________________
__________________________________________________________________________

Thank you!