

**Hurst Animal Clinic**  
640 Bedford-Euless Rd.  
Hurst, TX 76053  
817-282-1463

Thank you for entrusting us with your pet's wellness and preventative needs! Your pet is here today for their annual physical and scheduled vaccinations. To provide the best possible care, we ask that you take a few minutes to answer the following questions:

Today's Date \_\_\_\_\_ Email \_\_\_\_\_

Your Name \_\_\_\_\_

Pet's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Other \_\_\_\_\_

**Have you noticed any of these SYMPTOMS?**

	<u>YES</u>	<u>NO</u>		<u>YES</u>	<u>NO</u>
<i>Vomiting</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Changes in appetite</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Diarrhea</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Bad breath</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Coughing or sneezing</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>New lumps</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Getting tired</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Wheezing</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Are you on Grain-free food?</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Itchy skin/licking self</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Difficulty getting up or around</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Fleas or ticks</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Increase in water consumption</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Hair loss</i>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Change in urination habits</i>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Vision/ hearing changes</i>	<input type="checkbox"/>	<input type="checkbox"/>

**MICROCHIP**

Are you interested in  
microchipping your pet?

Y ☐ N ☐ PLEASE DISCUSS WITH ME ☐

CONTINUED ON NEXT PAGE

## **EARLY DETECTION BLOODWORK**

**(This is different from your heartworm test!)**

While a comprehensive annual exam can tell us a lot about your pet, many diseases can be subtle and slowly progressing. Just as it does with people, **EARLY DETECTION BLOODWORK** allows us to identify and address these conditions much sooner, before your pet shows serious signs of illness. Unless the pet's exam shows something else is needed, current cost for screening bloodwork is:

- \$129.99 for dogs ages 0-7 in addition to the annual vaccine package
- \$184.99 for ages 8 and older, (or possibly younger in Large or At Risk breeds)

Are you interested in      **Y** ☐    **N** ☐    **PLEASE DISCUSS WITH ME** ☐  
this blood work?

## **NON CORE VACCINES** (please check if interested)

- ☐ **Leptospirosis** – *Highly Recommended, but not required for all of Dogs in D/FW*
- ☐ **K-9 Influenza** – *Only Recommended for Boarding and Grooming dogs*
- ☐ **Rattlesnake Vaccine** – *Only recommended for dogs with significant exposure to venomous snakes*

What medications is your pet on including supplements? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any other concerns that you would like to discuss with the doctor?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Thank you very much for taking the time to fill out this form!*