

A History of Caring for Your Pets

Dermatology Questionnaire

To help us diagnose your pet's skin condition, please answer these questions:

1. Areas affected, itching/hairloss: Ears Abdomen (belly) Back/tail area Perineum (below the tail near the anus and vulva/scrotum) Chest Other area_____ 2. Itching intensity (on a scale of 10) Most recent Flea control product used ______ 4. How often given?_____ 5. When was last dose given? 6. Most recent brand of Heartworm prevention used 7. When was last dose given?_____ 8. Environment: a. How much of the time is pet outside______% b. Smoker in home?_____ c. Other pets? d. Wildlife (Coyotes, raccoons, other varmints) seen near yard?

e. Bedding? Cedar chips? Straw? _____

	f.	House plants?
9.	Food:	
	a.	Brand
	b.	Canned/dry
	c.	Treats
	d.	Table food?
	e.	History of other food
10. Medications: In the past, have any of the following helped with the itching/skin condition?		
	a.	Antibiotics
	b.	Antihistamines
	c.	Steroids (pill or shot)