



Mt. Scott Animal Clinic

8401 SE Ellis St.
Portland, OR 97266
(503)777-3919

Please fill out the following questions and e-mail us the answers (or print this out and bring it with you to the appointment).

Please fill out this questionnaire prior to your appointment.

1. What are your current medical concerns for your pet, and what are the symptoms you are seeing?

1a. How long have you noticed these symptoms for?

2. What behavior changes have you noticed with your pet?

3. What food is your pet currently eating?

4. Is currently on a flea/tick/parasite medication? yes no
-If **yes**, what is the brand of medication?

5. Is your pet indoor only, outdoor only, or both? Does your pet have contact with other pets (boarding, grooming, ect?)

6. Has your pet travelled out of state? Yes No
-If yes, where has your pet traveled to?

7. What medications is your pet currently taking?

8. What else would you like the doctor to know about your pet?