

# WEST COAST

## VETERINARY CLINIC

### DERMATOLOGY CLIENT QUESTIONNAIRE

What is the main problem? .....

At what age was this condition first noticed? .....

Has there ever been any previous dermatitis?  Yes  No

#### DO THE SYMPTOMS VARY?

If the dermatitis has been present for some time are the symptoms worse in:

Spring  Summer  Autumn  Winter

Are the symptoms present all year around?  Yes  No

If yes, would there be a time of no symptoms at some stage?  Yes  No

What (if anything) causes a worsening of symptoms? .....

What helps? .....

#### HOME DETAILS:

Do you have any other pets – and if so how many?

Cats  Dogs  Birds  Other (please specify) .....

Do you know of any relative of this pet that has skin problems?  Yes  No

Does any human in the house have skin problems?  Yes  No

Where does this pet sleep? .....

Have there been any other illnesses? (if yes, please specify) .....

#### BATHING AND FLEAS:

Does bathing:  help  worsen  make no difference

How often do you prefer to bath your pet?  weekly  monthly  rarely

When was the last time a flea was seen on this pet? ..... other pets? .....

What is the current flea treatment on this pet? .....

Is flea treatment used on other pets? .....

#### MEDICATION:

If previous medications have been used, do you know what they were?  Yes  No

If yes, were they:  shampoos  rinses  injections  tablets  ointments

Last tablet given(date): ..... Response:  none  some  good

Last injection given(date): ..... Response:  none  some  good

# DERMATOLOGY CLIENT QUESTIONNAIRE

(continued)

## DIET:

What do you normally feed your pet?  cans  dry  table scraps  meat

If meat – which types? .....

Any other food? (eg., vitamins, toast, biscuits) .....

Have you ever fed a special diet?  No  Yes: What? .....

## SYMPTOMS:

Have any of the following been observed:

sores  scabs  dandruff  hair loss  odour  hives  redness  ear problems  watery eyes  weight loss

weight gain  vomiting  diarrhoea  tiredness  depression  increased appetite  "heat"  increased thirst

## DOES YOUR PET:

rub at the face  lick or chew the paws  scratch at the sides  roll on the back  bite at tail area

lick the stomach area  sneeze  snort  wheeze Other? .....

What do you think could be the cause of the problem? .....

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