

Southern Cross Veterinary Clinic Client Questionnaire (Dogs)

Thank you for taking the time to complete this questionnaire. Please fax (041 373 4258), e-mail (scvc@corpdial.co.za) the completed form back to us or you are welcome to leave it at reception. Dr Kerr will then contact you to make an appointment.

Your details

Surname			
First name		Title	
Tel home		Tel cell	
Tel work		Fax	
Postal address			
Physical address			
E-mail address		Referred by	
Your vet's name & contact no			

Details of all your pets (the one with the biggest problem first*)

Pet's name	Breed	Sex	Age obtained	Age now	Sterilised?

Presenting complaint

<p>Please describe the main problem you wish to address. How much of a problem do you consider this behaviour to be?</p>	
<p>When did this problem first start?</p>	
<p>Please describe the first incident. When did it take place?</p>	
<p>How often does this problem behaviour occur?</p>	
<p>Please describe the most recent incident. When did it take place (date)?</p>	
<p>Has the frequency of the problem behaviour(s) increased/decreased/remained the same?</p>	
<p>Has the intensity of the problem behaviour(s) increased/decreased/remained the same?</p>	
<p>What other problems would you like to address?</p>	
<p>What have you tried to do to fix the problem (if anything) and what were the results?</p>	

		Y / N	When?
Has your household changed since acquiring the pet?	Death of human in family		
	Death of pet in family		
	Marriage / partner moved in		
	Divorce		
	New baby		
	Child moved out		
	New pet		
	Family moved house		
	Family schedule changed (e.g. job changes)		
	Other (please describe)		
Please describe the type of accommodation you live in			

Details of people in the household (including yourself and everybody who lives in the home permanently)

Name	Age	Relationship to you	Occupation

Details of other people the dog is familiar with (friends and family that visit on a regular, frequent basis, staff etc)

Name & relationship (i.e. friend, staff member etc)	Approximate age	Visits how often?	Dog's reaction to visitor?

More about the problem dog:

Where did you get the dog from?					
Why did you get this dog?					
How many previous owners has your dog had?					
Does your dog have regular, occasional or no access to the house?					
Where is your dog when you are not at home? (e.g. at work during the day)					
Where does your dog sleep?					
Does your dog jump up against you or other people without permission?					
Indicate your dog's activity level: High, average, low, excessive					
Do you or someone else take your dog for walks?			How often?		
Does your dog have toys? Please describe					
Do you or someone else play with the dog?			How often?		
Do you or your dog begin and end play?					
What does your dog do during the day?					
What does your dog do during the night?					
How does your dog respond to strange dogs?					
How does your dog respond to strange people?					
What food do you feed your dog?					
How often do you feed your dog?					
Is the food always available? Does your dog steal or guard food?					
How quickly is the food eaten? Within 5 minutes, half an hour, several hours?					
Does your dog get snacks/treats?			How often?		
Has your dog had formal training?	Y/N	At what age?		How beneficial was it?	
Did your dog attend puppy socialisation classes?					
If your dog has had formal training, what method was used?					

How well does your dog walk on a lead?					
What type of collar / chain do you use?					
Which of the following commands does your dog consistently respond to?	Sit		Lie down		Come
Any other commands your dog responds to consistently ?					
What does your dog enjoy most?					
What does your dog enjoy least?					
What role(s) does your dog play in your life?					
Are you generally in a healthy state? If not, please supply as much detail as you wish.					
Are your dog's vaccinations up to date?					
When was your dog last examined by your vet?					
Does your dog have any medical problems? Please describe.					
Is your dog currently on any medication (including supplements or natural remedies)? Please specify.					

Anything else you would like to add:

I will inform Dr Kerr of any changes in my dog's behavior and of any changes to medication. I understand that any of these changes may affect the type and duration of treatment. I will inform Dr Kerr if my dog is receiving treatment elsewhere. I have given all relevant behavioural and medical history and believe the information given to be correct. I give permission for Dr Kerr to exchange information with my veterinary practice about my dog's behaviour. I understand that working through a behavioural problem requires time and patience and I undertake to follow Dr Kerr's advice and treatment plan to the best of my ability. I also understand that certain behavioural conditions cannot be cured and require lifelong management.

NAME: _____

SIGNATURE: _____

DATE: _____