

# RIVERVIEW

ANIMAL



HOSPITAL

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## ADR/Not Feeling Well But Not Sure Why Concerns

Date \_\_\_\_\_ Owner's Name \_\_\_\_\_ Pet's Name \_\_\_\_\_  
Pet's Age \_\_\_\_\_ Pet's Weight \_\_\_\_\_

Symptoms/Concerns Today

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When did you first notice these symptoms? \_\_\_\_\_

Is your pet on medications or over the counter supplements? \_\_\_\_\_

Medications/Supplement Names: \_\_\_\_\_

Have you given them anything for this (Peptobismol, Aspirin, etc.)? \_\_\_\_\_

Last time your pet had their medications? \_\_\_\_\_

Any known allergies to medications? If so, which ones? \_\_\_\_\_

Is your pet still eating and drinking normally? \_\_\_\_\_ When was the last time they ate? \_\_\_\_\_

What brand of food do you feed? \_\_\_\_\_

Did you recently change anything in their diet (food, treats)? \_\_\_\_\_

Is your pet prone to chewing/ingesting foreign objects (socks, garbage, shoes, strings, etc.)? \_\_\_\_\_

Any Vomiting or Diarrhea? \_\_\_\_\_ If so, how often? \_\_\_\_\_

Any behavioral changes? \_\_\_\_\_ If so, please explain \_\_\_\_\_

If there are other pets in the home, are they showing the same symptoms? \_\_\_\_\_

Any changes in the home (someone move in/out, new pet, etc)? \_\_\_\_\_

Still urinating and defecating? \_\_\_\_\_ Any changes in weight? \_\_\_\_\_

Other concerns today? \_\_\_\_\_