



*Wildwood Veterinary Hospital 1115 Luchessi Drive, San Jose, California 95118 408.265.8811*

**Visit Information:**

Thank you for giving us the opportunity to help care for your pet. In order to serve you better, please fill out the following information about your bird.

Patient name: \_\_\_\_\_ Date: \_\_\_\_\_

What is the reason for today's visit? \_\_\_\_\_

Has your pet received veterinary care outside Wildwood since they were last seen with us? Yes No

If yes, when and where? Please provide all locations and approximate dates: \_\_\_\_\_

Has any of your husbandry changed since the last time you were here? Yes No

If yes, please fill out a husbandry form or verbally go over with your technician.

What does your pet eat? Please include all foods and treats offered: \_\_\_\_\_

Do you offer pellets? Yes No If yes, what brand? \_\_\_\_\_

How often do you feed your pet? \_\_\_\_\_

How much is offered for each meal? \_\_\_\_\_

Please describe any previous medical problems: \_\_\_\_\_

What medication is your pet currently on? Include all prescriptions, supplements, vitamins, topical treatments, etc: \_\_\_\_\_

If your pet is sick, has your pet experienced any of the following?

Regurgitation	Diarrhea	Coughing	Sneezing
Loss of appetite	Change in activity level		No

If present, please describe: \_\_\_\_\_

Has your pet experienced any of the following?

Excessive consumption of water	Excessive urination	Straining to urinate
Decreased stool production	Straining to defecate	No

If present, please describe: \_\_\_\_\_

When did the above symptoms first appear? \_\_\_\_\_ N/A

How have these symptoms changed since first being noticed? \_\_\_\_\_ N/A

Have any at home treatments been provided for this concern? \_\_\_\_\_ N/A

**Behavior Comments:**

Has your pet exhibited aggressive behavior before? Yes No

If yes, please describe: \_\_\_\_\_

Is your pet exhibiting hormonal or mating behaviors? Yes No