

Animal Allergy History Form

Date:

Owner:

Pet:

Breed:

M/F/Neutered?

How long have you owned the pet?

How old was the pet when you obtained it?

What other pets are in the household?
Describe the complaint:

Do they have any skin problems?

Sudden or gradual?

Continual or intermittent?

Seasonal or non-seasonal?

How long has the problem been present?

What areas are affected?

Is there hair loss?

If so, what is the distribution?

If there is hair loss, which came first, the hair loss or the scratching?

Does the pet scratch, chew, bite, or lick himself?

Does it rub its face or chew its paws?

Describe the pet's diet?

Does the pet get table food, biscuits, treats, rawhide, pig ears, natural bones, cow hooves, milk bones, pupperonies, beggin-strips, cookies, or ANY other kind of food item?

Does the pet ever eat other pet's fecal matter?

What kind of heartworm prevention is the pet on?

Is the mostly indoors, outdoors, or partly in and out?

Does your pet roll in the grass?

Does it roll around on the carpet?

What prior treatments (including shampoos) has the pet received?

Which one(s) works best?

Has the pet been shampooed recently?

Additional comments:
