



Wellness Through Mobility

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Patient:	Species:	Breed:	Age:
Owner:		Address:	
Best contact 📞:			
E-mail:			

Main Cause(s) of Concern:

Current Exercise Level:

Secondary Cause(s) of Concern:

Medical History:
(Please outline what was effective, what has been ineffective with respect to previous treatments)

Current Medications, Supplements:
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Current Diet:

Traditional Chinese Medicine History Form
When do symptoms tend to occur with respect to: <i>Season:</i> <i>Hour:</i> <i>Other (activity?):</i>
What sort of energy level does your pet have? (circle/highlight terms that apply) <i>Better in the morning or, better in the evening:</i> <i>Exercise tolerance:</i>
What is your pet's appetite like? (circle/ highlight terms that apply) <i>Normal Increased Decreased Picky</i>
Is there any gas production? (circle/highlight terms that apply) <i>Burping</i> <i>Gurgling from the intestines</i> <i>Flatulence</i>
Does your pet vomit? Y/N, if so: <i>When does this occur?</i> <i>Is it related to eating / drinking?</i> <i>What is in the vomit? Food Fluid</i>
Is your pet's thirst/drinking: (circle/highlight terms that apply) <i>Normal Increased Decreased</i> <i>Frequent small sips</i>
Is your pet's stool: (circle/highlight terms that apply) <i>Texture: Normal Soft Hard Dry Mucousy Diarrhoea Bloody</i> <i>Colour: Black Brown Yellow Red Green</i> <i>Odour: Normal Strong None</i>
Is your pet's ability to pass stool: (circle/highlight terms that apply) <i>Normal, or are they fecally incontinent, retaining feces, straining to pass faeces</i> <i>Obstipated / constipated</i>
Is your pet's urine: (circle/highlight terms that apply) <i>Volume: Normal Increased Decreased</i> <i>Colour: Pale, Dark, bloody</i> <i>Odour: normal, abnormal</i>

Is your pet's ability to pass urine: (circle/highlight terms that apply)

Normal, or are they incontinent, straining

What is the frequency that your pet passes urine?

Is your pet's behaviour: (circle/highlight terms that apply)

Fearful Friendly Aggressive

Anxious (worried)

Is your pet's sleep: (circle/highlight terms that apply)

Normal Deep (hard to rouse) Wakes Pacing

Dreams No dreams

What is your pet's temperature preference: (circle/highlight terms that apply)

Hot, Cold, Neutral, Not noted to have a preference

Do you feel your pet is in pain? Yes/no.

If yes: (circle/highlight terms that apply)

Where?

Is it long standing, or a new finding?

Is it Better with Rest, Exercise, Hot or Cold