

Patient History

Lexington Veterinary Associates

Hickory Tree Vet Hospital

118 S Village Drive
Winston Salem NC 27127
336-775-2303

Jordan Vet Hospital

300 Highway 64 E
Lexington NC 27292
336- 249-3991

Denton Veterinary Hospital

175 Haywood Street
Denton NC 27239
336-859-2828

Patient Name: _____ Dog Cat Other _____

Male/ Female Spayed/Neutered? Yes No

Date of birth: _____ Or, estimated age: _____

Breed: _____ Color _____ Distinctive Markings: _____

Habitat: Indoor Only Outdoor Only Indoor/ Outdoor

If indoor/outdoor, please specify: _____% Indoor, _____% Outdoor

Diet: Dry food Wet food Other/ Table food _____

Eats at certain times of the day Free feeding _____Cups/day

Activity Level: Very Active More Active Normal Less Active Inactive

Do you plan to have your pet boarded or groomed? Yes No

Urination: Normal Increased Decreased

Defecation: Normal Increased Decreased

Appetite: Normal Increased Decreased

Water Consumption: Normal Increased Decreased

Vomiting: Yes No

Diarrhea: Yes No

Coughing: Yes No

Sneezing: Yes No

Scratching/Chewing/Licking: Yes No

Any other Concerns or questions that need to be addressed today?

Heartworm Prevention: _____ None

Flea/ Tick Prevention: _____ None

Other current medications: _____

Please check all vaccines that your pets have previously received:

Canine: Distemper/Parvo Bordetella Rabies Lyme Leptospirosis

Procedures: (Dental, Orthopedic, etc.): _____

Feline: Rabies Feline Distemper Feline Leukemia

Procedures: (Dental, Orthopedic, etc.): _____