

# Pet Health Report Card



OWNER'S NAME:  DATE:

PHONE NUMBER:  EMAIL ADDRESS:

PET'S NAME:  DOB:  /  /  AGE:  WEIGHT:

NEUTERED/ENTIRE:  N/E

## Top to Tail Examination

Coat and skin								
Appear normal	Scaly	Shedding	Itchy	Pigment	Hairloss	Dull	Lumps & bumps?	Other
Eyes								
Appear normal	Squinting left	Squinting right	Discharge left	Discharge right	Swelling left	Swelling right	Other	
Ears								
Appear normal	Itchy (both ears?)	Redness left	Redness right	Hearing affected left	Hearing affected right	Excessive hair growth left	Excessive hair growth right	Other
Nose and throat								
Appear normal	Coughing		Inflamed throat		Discharge from nose		Other	
Mouth								
Appears normal	Tartar build up	Redness of gums	Swelling in the mouth		Loose teeth		Bleeding	Other
Legs and paws								
Appear normal	Lameness (LF, RF, LH, RH)	Nails too long		Stiffness in joints		Foot hair decolouration		Other
Chest auscultation								
(Heart/ Lungs)								
Appears normal	Heart sounds abnormal	Chest sounds abnormal		Coughing	Breathing difficulty	Breathing fast	Heart rate fast	Other
Abdomen								
Appears normal	Painful/ tender	Swollen	Fluid	Other				
Urogenital system								
Appears normal	Abnormal discharge	Redness around genitals		Anal sac problems	Swelling (testicles, mammary glands)		Pain	Other

1. Our nurse is not qualified to make any diagnoses, if she has any concerns this will be discussed with you and you will be referred to one of our vets against normal rates.
2. Your data will not be used for any marketing purposes.



### Address

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### Contact

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