



PET HEALTH ASSESSMENT

To be completed, dated & signed by your pet's veterinarian. **Date:** _____

Animal's Name:		Owner's Name:	
Animal's Birth Date:	Date of Most Recent Physical Exam:	Date of Last Vaccination:	

- | | | | |
|--|------------------|------------------|-------------|
| 1. General Assessment | <i>Healthy</i> | <i>Unhealthy</i> | |
| 2. Vision | <i>Good</i> | <i>Reduced</i> | <i>Poor</i> |
| 3. Hearing | <i>Good</i> | <i>Reduced</i> | <i>Poor</i> |
| 4. Mobility (balance & stiffness) | <i>Good</i> | <i>Reduced</i> | <i>Poor</i> |
| 5. Attitude | <i>Unchanged</i> | <i>Irritable</i> | |
| 6. Has the pet had excessive weight gain or weight loss in the last year? | | <i>yes</i> | <i>no</i> |

If yes, explain: _____

7. Does the pet have any suspected or confirmed medical conditions that may interfere with its ability to be a PALS visitor?

- | | | |
|----------------------------|------------|-----------|
| • Urinary Incontinence | <i>yes</i> | <i>no</i> |
| • Diabetes Mellitus | <i>yes</i> | <i>no</i> |
| • Cushing's | <i>yes</i> | <i>no</i> |
| • Arthritis or Spondylosis | <i>yes</i> | <i>no</i> |
| • Skin Lesions or disease | <i>yes</i> | <i>no</i> |
| • Immune compromised | <i>yes</i> | <i>no</i> |
| • Seizures | <i>yes</i> | <i>no</i> |
| • Other | | _____ |

If yes to any of the above, is the disease/condition under control? _____

8. **Is this pet on any ongoing medication?** *yes* *no*

If yes, specify and explain: _____

9. **Does this pet have any gum or dental disease?** *none* *mild* *moderate* *serious*

10. **In your opinion is this animal physically fit?** *yes* *no*

(As a veterinarian, you may not know that PALS pets are subject to: slippery surfaces, environmental heat, rough handling, unpredictable environments, stairs)

Vaccination All PALS *dogs, cats & ferrets* must have a current Rabies vaccination.

	Date Given	Due Again
Rabies		
DA2PL		
Parvo		
FVRCP		
Other		

Additional Comments: _____

Signature of Veterinarian

Name of Clinic

Please fax completed form to (403) 250-9273. Thank you.