



County Line Veterinary Hospital  
325 W County Line Rd, Hatboro, PA 19040  
Ph: 215-675-0533  
Email: staff@countylineveterinary.com

## Well Visit Form

Are there any changes in address/contact numbers from the original information provided to us?

☐ Yes (if yes, please fill in below) ☐ No

Client Details		Animal Details	
Name		Name	
Address		Species	
		Breed	
		Age	
Phone(s)		Sex	
		Weight	

Have you noticed any issues/problems with your pet? Are there any concerns for the following:  
(check all that apply)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Increase in appetite | <input type="checkbox"/> Decrease in appetite | <input type="checkbox"/> Increase in drinking  |
| <input type="checkbox"/> Decrease in drinking | <input type="checkbox"/> Itching / Scratching | <input type="checkbox"/> Weight Gain           |
| <input type="checkbox"/> Weight Loss          | <input type="checkbox"/> Shaking Head         | <input type="checkbox"/> Bad Breath            |
| <input type="checkbox"/> Vomiting             | <input type="checkbox"/> Diarrhea             | <input type="checkbox"/> Urination Issues      |
| <input type="checkbox"/> Excessive Sleeping   | <input type="checkbox"/> Scooting             | <input type="checkbox"/> Difficulty Rising     |
| <input type="checkbox"/> Skin Masses          | <input type="checkbox"/> Car Sickness         | <input type="checkbox"/> Behavioral Problem    |
| <input type="checkbox"/> Coughing             | <input type="checkbox"/> Sneezing             | <input type="checkbox"/> Other (explain below) |


Has your pet been to a different vet, or specialty hospital, since their last visit here?

☐ Yes (if yes, please explain below) ☐ No


Is your pet currently on any preventatives?

☐ Yes (if yes, please list below) ☐ No


Have they missed any doses of Heartworm Prevention?

☐ Yes ☐ No

Please list all other Medications that your pet is currently taking (note if any refills are needed):


Please specify your pet’s current diet, including any dietary restrictions or food allergies:

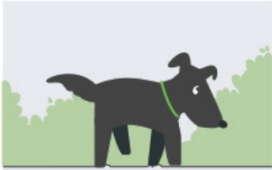
Does your pet come into contact with any other animals? Please check all that apply to their lifestyle:

- ☐ None
- ☐ Boarding
- ☐ Grooming
- ☐ Dog Parks
- ☐ Other (explain below)

Would you like to get any additional services during your appointment?

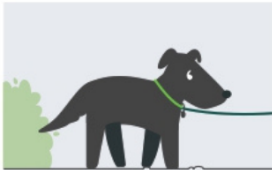
- ☐ Anal glands
- ☐ Nail trim
- ☐ Ear cleaning
- ☐ Other (list below)

**\*\* CANINE ONLY \*\*** Does your dog show signs of Pain or Arthritis? Use the checkbox below image:



☐

Limping after exercise




☐

Lagging behind on walks



☐

Slow to rise




☐

Difficulty jumping



☐

Feeling stiff



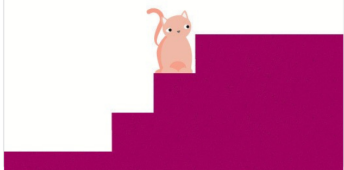
☐

Difficulty with stairs

Other Signs or Behaviors:

**\*\* FELINE ONLY \*\* Does your cat show signs of Pain or Arthritis? Use the checkbox below image:**

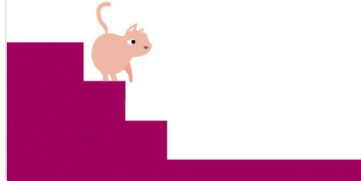
**JOINT DISEASE**



**Climbing up stairs:** Uses 'bunny-hop' with both back legs hopping at same time, and/or stops for a break



☐

**JOINT DISEASE**





**Climbing down stairs:** Angles body to the side, descends one stair at a time, and/or stops for a break

☐

HEALTHY	JOINT DISEASE
	

**Chasing moving objects:** Slows down or takes breaks during play and/or may have thinner frame near tail


☐

HEALTHY	JOINT DISEASE
	

**Jumping up:** Hesitates before jumping up, doesn't clear jumps in one leap, and/or uses arms to pull the legs up



☐

**JOINT DISEASE**



**Jumping down:** Hesitates before jumping down, makes smaller jumps vs. one big one and/or reaches down towards the ground instead of leaping

☐

HEALTHY	JOINT DISEASE
	

**Running:** Moves at a slower speed and alternates between jogging & walking, and/or back feet angle together

☐

**Other Signs or Behaviors:**

**\*\* FELINE ONLY \*\* What is your cat's environment?**

- ☐ Indoor Only    ☐ Outdoor Only  
☐ Indoor / Outdoor

**Signature:**

**Date:** \_\_\_\_\_

\_\_\_\_\_