

Virginia Scrivener 2017

Certified Canine Rehabilitation Practitioner

Certified Veterinary Pain Practitioner Certified Veterinary Medical Acupuncturist

www.AnimalRehabVet.com

27 East Baltimore Street ◆ PO Box 841 Funkstown, MD 21734 301-745-8975

Questionnaire

Why are you bringing your pet in for rehab therapy?

1.	What p	roblems or issues are you seeing?
2.	When o	lid the problem first arise?
3.	ls it wo	rse in the mornings or evening?
4.	How ha	s the problem developed since first noticed?
5.	What a	re YOUR goals for your pet with physical therapy?
Home		onment ype of floors do you have?
2.		does your pet sleep?
3.	Do you	have stairs in your home? Y or N
	a.	Does your pet have to use them daily? Y or N
4.	What d	o you feed your pet and how much?
	a.	What treats does your pet like?
	b.	Does your pet have any allergies? Y or N If yes what kind?
5.	Do vou	take your pet for walks? Y or N
	a.	If yes, how long of a walk?min. Is your pet walked On or off of a leash?
	b.	Do the noticed symptoms or lameness worsen after taking a walk?
	c.	Does your pet tire quickly or have to make many stops on walks?

6. Has your pe	et's behavi	or changed with: ((Please chec	ck all th	at apply,)					
	☐ Famil	ly members		l Child	lren						
	☐ Other	r dogs		l Goin	g to the	vets					
	☐ Visito	ors		l Peop	ole passin	ng by t	he hous	se			
	☐ Loud	noises		l Bein	g groome	ed/hav	ing nai	ls			
		clipp	ped								
		l Bein	g left alo	ne							
Physical Assess	ment										
Please rate from 1	! (with dif	ficulty) to 5 (with	hout difficu	ılty)							
1. How well is you	r pet able	to position to urin	ate or defe	cate?	1	2	3	4	5		
2. How well is you to a standing posit	•		a lying posi	tion	1	2	3	4	5		
3. How well does y	our pet go	o up and down sta	irs?		1	2	3	4	5		
4. How well is you	r pet able	to get in and out o	of the car?		1	2	3	4	5		
5. Is your pet able	to get on/	off the couch or b	ed without		1	2	3	4	5		
assistance?						_		_	_		
6. Is your pet able	to run or J	ump?			1	2	3	4	5		
Medical History	у										
	_	g any medications st the medications,			_		_	glucosa	mine sup	plemen	ts) at this
Medication/Supplement					Dose Ho		Howa	How often given			
I Medication/Suppli	ement				Dose		now o	nten gi	VCII		
Wedication/Suppli	ement				Dose		now o	iten gi	VCII		
Wedication, Suppli	ement				Dose		now o	iten gi	ven		
Wedication/ Suppli	ement				Dose		HOW 0	iten gi	ven		
Wedication/ Suppli	ement				Dose		HOW O	iten gi	ven		
Wedication/ Suppli	ement				Dose		now o	iten gi	ven		
Wedication/ Suppli	ement				Dose		now o	iteli gi	veii		
Wedication/ Suppli	ement				Dose		now o	iteri gi	veii		
Wedication Suppli	ement				Dose		now o	iten gi	veii		
		nrevious diagnose	os surgeries	ortrea			now o	iteli gi	veii		
		previous diagnose	es, surgeries	ortrea			now o	iteli gi	veii		
		previous diagnose	es, surgeries	or trea			now o	iteli gi	veii		
		previous diagnose	es, surgeries	ortrea			now o	iteli gi	veii		
		previous diagnose	es, surgeries	ortrea			now o	iteli gi	veii		
2. Have there	been any	previous diagnose					now o	iteli gi	veii		
2. Have there	been any	ion of your pet's d		in? rs when t	atments?		C	Constantlifficult to	y groaning o disctract f	rom pain	
2. Have there 3. What is you Comfortable Happy, Cont	been any	ion of your pet's d	egree of pai thes or whimper tiously uncomfo sive licking	in? rs when t	atments?		C	onstantl ifficult to Jnrespor	y groaning o disctract f	rom pain	
2. Have there 3. What is you Comfortable Happy, Cont	been any	ion of your pet's dong Flinc Obvings Relu	egree of paiches or whimper iously uncomfo sive licking actant to come	in? rs when t	ouched		CD	constantlifficult to	y groaning o disctract f nsive to surro	rom pain	
2. Have there 3. What is you Comfortable Happy, Cont	been any	ion of your pet's d	egree of pai thes or whimper iously uncomfo sive licking ctant to come	in? ers when to when co	ouched for the control of the contro	t interessettled,	C D L	onstant ifficult to Jurespon	y groaning o disctract f nsive to surro	rom pain oundings	