

Comprehensive Health Assessment & Risk Management Schedule

“C.H.A.R.M.S.”

OFFICE USE:

Patient:	
Client:	
Chart #:	
Current Date:	

Dr	
s/w	



Where does your pet spend his/her time? What percent?

Indoors <input type="checkbox"/> _____ %	Suburban/Urban Living <input type="checkbox"/> _____ %	Hiking Trails <input type="checkbox"/> _____ %
Beach/Lake <input type="checkbox"/> _____ %	Suburban/Urban Backyard <input type="checkbox"/> _____ %	Rural Acreage <input type="checkbox"/> _____ %
Other: <input type="checkbox"/> _____; _____ %		

Does your pet like to swim or drink from puddles? Yes No

Do you travel with your pet? Yes No

When you are out of town does your pet: Board Have a pet sitter Go to a friend's house

Does your pet come into contact with other people's pets? Yes No

In what sort of situations? _____

Is there wildlife in your area? (Including deer, rabbits, squirrels, raccoons, skunks, etc.) Yes No

Have you ever seen fleas on your pet? Yes No

Have you ever seen ticks on your pet? Yes No

Do you use flea/tick preventative on a monthly basis all year round? (dogs & cats)..... Yes No

Do you use heartworm preventative on a monthly basis all year round? (dogs & cats).... Yes No

What products do you use? _____

Has it been more than six months since your last veterinary visit? Yes No

Is your pet currently on any medications, supplements, or special diets? Yes No

Has your pet ever suffered any serious illnesses or diseases? Yes No

Explain*: _____

Does your pet have any chronic conditions such as Liver Disease, Immune Diseases (autoimmune, inflammatory/allergies, leukemia/lymphoma), or a terminal illness? Yes No

Is your pet allergic to any medications or vaccines that you know of? Yes No

Which vaccine(s): _____

Has your pet ever experienced any behavior problems? Yes No

Explain*: _____

*If you require extra space for your explanations please continue on the back of this sheet.

The answer to these questions can help your veterinarian develop a wellness plan that is right your individual pet. Recommendations may include diagnostic screenings, therapeutic or preventative medications/services, and immunizations.

