

History Form for Small Mammals

*In order to best evaluate and treat your sick pet, it is necessary for all aspects of its husbandry and care to be considered, as any of these could contribute to its disease. Therefore, please take the time to fill out the following questionnaire to the best of your knowledge, and submit the completed form to reception (ideally at least 24-hours prior to your appointment). If you are unsure of any of the questions please leave blank, and they can be discussed during the consultation.*

Signalment

- Age.....
- Sex (male, female, unknown).....
- Species.....
- Neutered (yes, no).....
- Colour.....
- Weight (kg).....
- Other in-contacts (yes/no).....
  - If yes, sex (male, female).....

Enclosure details

- Size of cage, material, location.....  
.....  
.....  
.....
- Frequency of cleaning.....  
.....  
.....
- Disinfectant used.....  
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MANOR VETERINARY CENTRE – SMALL MAMMAL HISTORY FORM

Diet

- Full details.....  
.....  
.....  
.....
- Last meal.....  
.....
- Supplements (type and frequency).....  
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- Source of water.....

History

- Faecal pellets (description).....  
.....
- Any faeces evident at perineal (bottom) region? (yes/no).....
- When faeces were last passed.....
- Faeces evident in box/container? (yes/no).....
- Previous history of illness or treatments.....  
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- Owner's current concern.....  
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MANOR VETERINARY CENTRE – SMALL MAMMAL HISTORY FORM

Client details

- Name.....
- Telephone number.....