



ANIMAL WELLNESS CENTER

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Patient TCVM History (Traditional Chinese Veterinary Medicine)

Owner's Name:

Patient Name:

Breed:

Sex:

Patient's Age:

Weight:

Is your dog on Heartworm preventative? _____ Which one?
(interceptor/sentinel/heartguard/proheart/other)

Please list your major concerns/complaints regarding your dog's health in order of their importance. Describe your concerns in detail and be sure to include the approximate date when each problem began.

1.

2.

3.

4.

What medical problems or surgeries has your dog experienced in the past?

If your dog is on any medications or supplements please list them:

Please answer the following as they apply to your dog.

Prefers Shady or cool locations (concrete/tile)
 Sun or warm locations (carpet)

Personality Hyperactive/outgoing/confident/strong
 Quiet/Timid/Less Confident

Appetite Ravenous or Good
 Good or finicky

Thirst Thirsty
 Less Thirsty
 Normal

Feces: Dry, Bloody or malodorous
 Loose or diarrhea
 Normal

Diet: What is your dog's diet?

Which choice best describes your dogs: choose one in each category

Interactions with people

- Aggressive or bossy
- Very Friendly
- Okay with Everyone
- OK, Aloof (confident)
- Timid (hides)

Greeting Strangers:

- Barks
- Wags tail warmly
- slow reaction
- does not care
- runs away

Patience:

- No
- Yes

Excitability:

- Yes
- Easily
- Slow
- No

In General:

- Irritable
- Vocal
- Mellow, Laid back
- Follows the Rules
- Insecure

When sleeping does your dog

- vocalize or wake you up at night (if yes, how often? every night? once a week? once a month?)
- experience muscle jerking while asleep (if yes, how often?)

Does your dog sleep too much?

- too little?

Does your dog have stiffness? ___Yes ___ No If yes, then is it worse

- in the morning

- in the evening
- with cold
- with heat
- with damp
- after a walk
- before a walk

What is your dog's response to massage? Likes/dislikes

From the list, mark all that apply to this patient:

- | | |
|---|--|
| <input type="checkbox"/> lively | <input type="checkbox"/> deafness |
| <input type="checkbox"/> communicative | <input type="checkbox"/> reproductive problems |
| <input type="checkbox"/> very friendly | <input type="checkbox"/> relaxed, laid back |
| <input type="checkbox"/> affectionate | <input type="checkbox"/> sociable |
| <input type="checkbox"/> loves to be petted | <input type="checkbox"/> round and large |
| <input type="checkbox"/> center of the party | <input type="checkbox"/> loyal |
| <input type="checkbox"/> insomnia | <input type="checkbox"/> serene and balanced |
| <input type="checkbox"/> separation anxiety | <input type="checkbox"/> cares for others (Motherly) |
| <input type="checkbox"/> restless | <input type="checkbox"/> diarrhea |
| <input type="checkbox"/> excess heat | <input type="checkbox"/> constipation |
| <input type="checkbox"/> rapid heart rate | <input type="checkbox"/> loss of appetite |
| <input type="checkbox"/> heart problems | <input type="checkbox"/> vomits |
| <input type="checkbox"/> decisive | <input type="checkbox"/> gum disease |
| <input type="checkbox"/> assertive | <input type="checkbox"/> weak muscles |
| <input type="checkbox"/> confident | <input type="checkbox"/> overeats-obese |
| <input type="checkbox"/> strong | <input type="checkbox"/> worries |
| <input type="checkbox"/> impulsive | <input type="checkbox"/> loves order |
| <input type="checkbox"/> athletic-stamina | <input type="checkbox"/> obeys the rules |
| <input type="checkbox"/> alpha animal | <input type="checkbox"/> aloof |
| <input type="checkbox"/> ligament problems | <input type="checkbox"/> symmetrical body |
| <input type="checkbox"/> liver problems | <input type="checkbox"/> disciplined attitude |
| <input type="checkbox"/> red eyes | <input type="checkbox"/> good haircoat |
| <input type="checkbox"/> angers easily | <input type="checkbox"/> asthma |
| <input type="checkbox"/> ear problems | <input type="checkbox"/> dry skin |
| <input type="checkbox"/> nail problems | <input type="checkbox"/> sinus problems |
| <input type="checkbox"/> footpad problems | <input type="checkbox"/> nose problems |
| <input type="checkbox"/> anal sac issues | <input type="checkbox"/> cough |
| <input type="checkbox"/> careful | |
| <input type="checkbox"/> curious | |
| <input type="checkbox"/> self contained | |
| <input type="checkbox"/> likes to hide | |
| <input type="checkbox"/> meditative | |
| <input type="checkbox"/> slow and consistent | |
| <input type="checkbox"/> rear weakness | |
| <input type="checkbox"/> fearful | |
| <input type="checkbox"/> bone and back issues | |
| <input type="checkbox"/> urinary problems | |
| <input type="checkbox"/> disturbed growth | |