

Acupuncture Patient History Form

Acupuncture is generally well tolerated by most pets. As in people, a small number of pets do not respond to acupuncture and it can take 6-8 treatments to know if acupuncture is going to help your pet. For most conditions your pet will need a treatment every 7-14 days initially, with a goal of going longer between treatments. Your pet can experience temporary discomfort at acupuncture sites and may respond by yelping or moving their head toward the acupuncture site. This pain response also occurs in people and is temporary. It is important to know that acupuncture is not a guaranteed cure for your pet's issues. The primary goal with acupuncture is to improve your pet's quality of life. Please fill out this form with as much detail as you can. Along with an exam, this form will help guide acupuncture treatment for your pet. Please fill out this form with as much detail as possible and return it at least 2 working days prior to your pet's scheduled acupuncture appointment.

Pet's Name:	Your Name:
Pet's Birthday or Estimated Age:	
Pet's Species/Breed:	
Is your pet spayed/neutered: Yes/No	What age:

1. What is the main reason(s) for seeking acupuncture for your pet?

2. What are your goals for your pet?

3. What medications, supplements, and/or herbs does your pet currently take? Include the name, strength, dose, and frequency (Example: Rimadyl 100mg 1 tablet once daily).

4. What other treatments has your pet received for their problem(s) and how did they respond? Please be as specific as possible. If there were medications/supplements that your pet is not currently taking please list those as well.

5. What is your pet's current diet? Include brand of food, amount fed, and frequency fed. Also include all treats, fruits, vegetables, and other people food/table scraps and how much of each that your pet gets.

6. What other medical problems has your pet had? If these problems were not treated at Blue Cross Animal Clinic, please have the vet's office or referral practice send us a copy of records including any diagnostics/tests and the results.

7. Please circle all that apply to your pet's preferences.

Warm Areas	Cool Areas	No preference
Soft Surfaces	Hard Surfaces	No preference
Being alone	Being around others	No preference
Happier in the morning	Happier in the evening	No preference

8. Does your pet have any occasional vomiting or abnormal stools (diarrhea, constipation, etc)? If yes, how frequently? Please be as specific as possible if there are known triggers and describe the vomitus or stool (color, consistency, any strong odor, etc).

9. Circle all that apply to your pet's eating and drinking habits.

Appetite:	Normal	Increased	Decreased	Always been picky
Thirst:	Normal	Increased	Decreased	
Drinks large amounts frequently		Drinks large amounts infrequently		
Drinks small amounts frequently		Drinks small amounts infrequently		

10. Circle all that apply to your pet's urinations.

Frequency:	Normal	Increased	Decreased	
Color:	Clear	Normal	Dark	Pink/Red Tinged
Odor:	Normal	Strong Odor	No Odor	

11. Circle all that apply to your pet's skin and feet. Brittle Nails Dry Pads Dry skin with large flakes Dry skin with small flakes Greasy coat and skin Itchy all day Itchy in the morning Itchy during the day Itchy at night Chews on feet occasionally Chews on feet all the time Chews on feet at night Normal coat and skin

12. Circle all that apply to your pet's breathing. If there is nasal discharge/snot please describe it below.

Normal breathing	Occasional cough	Frequent cough	
Dry, non-productive cough	Productive cough	Quiet cough	Loud cough
Nasal congestion	Nasal discharge/snot	Frequent sneezing	

13. If your pet experiences pain or has mobility problems, please describe it below. For example: which leg(s), is it better or worse any specific time of day, after exercise, etc.

14. What other changes have you noticed in your pet? Include any changes to their sleeping patterns, overall activity, interactions with people and pets in the household, etc.

15. Is there anything else you want me to know that hasn't been covered in any of the other questions?