

Wisconsin Valley Veterinary Service



1605 Bovine Lane
Wausau, WI 54401
Phone: 715-675-9402
Fax: 715-675-9405

www.WisconsinValleyVet.net

CLIENT QUESTIONNAIRE FOR DERMATOLOGY/ALLERGY HISTORY

(Please answer to the best of your ability)

1. What skin or ear problem/s are you bringing your pet in for?

2. How long has the problem been going on for? (Be as specific as possible)

3. How old was your pet when the problem first started?

4. What did the skin or ear problem look like initially?

5. How has the problem changed or spread?

6. Is the problem worse during certain times of the year? (be specific as to when and duration)

7. Using a scale from 1 to 10 where 1 means an occasional scratch and 10 means constant scratching, how itchy has your pet been over the past month? _____
8. Is your pet receiving any treatments for the problem now? If so what?

9. Has your pet been treated for the problem in the past? If so how:

10. What are you feeding your pet now? Please include any treats (pet or human):

11. Have any different diets been tried as a treatment in the past? If so what was the name and for how long:

12. Do you routinely use flea or tick prevention product/s on your pet? If so, what are the name/s:

13. Do any of the other pets in the household have skin problems? _____

14. Do any humans in the household have skin problems? _____

15. Other than skin disease, does your pet have any diagnosed medical problems?

16. How often do you usually bathe your pet? _____

a. With what do you use to bathe your pet? _____

17. In the following table, check which symptoms have been present and how severe they have been over the entire course of the pet's skin or ear problem (Check **ONE** box for each symptom)

SYMPTOM	NONE	SLIGHT	SEVERE
Scratching/licking/biting at self			
Hair loss or poor regrowth of hair			
Increased redness to skin			
Small red spots, pimples, bumps, rash			
Dandruff, flakiness, scaliness of skin			
Increased odor of skin or coat			
Crusty or scabby patches on skin			
Open, raw sores			
Areas that ooze blood or pus			
Eyes – redness, irritation, itching, discharge			
Ear Infections			
Sneezing or wheezing			
Changes in pet's usual personality			
Changes in pet's activity level			
Changes in pet's appetite			
Changes in amount of water consumed			

18. How much licking, biting, chewing, scratching or rubbing does your pet do on the following areas of the body (Check **ONE** box for each symptom)

BODY AREA	NOT ITCHY	MILDLY ITCHY	SEVERLY ITCHY
Feet/ Paws			
Legs/ Arms			
Abdomen (belly)/ Genital Area			
Armpits/ Chest/ Sides of body			
Face/ Eyes			
Ears/ Ear flaps			
Along the back or rump			
The tail itself			
Anal area			