

Good Hands Veterinary Hospital

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www.goodhandsvet.com

David Lavernoich, DVM
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Vomiting/Diarrhea

Pet's Name: _____

1. How long has your pet been having these symptoms?
2. How many times has your pet vomited and/or had diarrhea?
3. What is the volume of the vomit/diarrhea?
4. What does the vomit/stool look like? (Mucus, blood, worms, watery, color, etc.)
5. Has there been any change in the normal diet?
6. Have you given any new treats or people-food?
7. Has your pet been destructive at home? (Chewed up blanket, torn up trash, etc.)
8. What medications or supplements does your pet take daily? Monthly?
9. How is your pet's appetite at home?
10. Is your pet drinking water normally?
11. Is your pet lethargic?
12. Do you give monthly heartworm prevention at home? If yes, do you give it monthly or seasonally? What is the name of the product you give?

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