



**ANIMAL
MEDICAL
CLINIC**
Indialantic

Canine

Risk Factor Questionnaire

307 4th Ave
Indialantic, FL 32903
amcindialantic.com



Patient Name: _____



Date: _____



Our vision at Animal Medical Clinic (AMC) is to be the leading veterinary practice in Brevard County, providing top quality service and the best in medical care for your pet. In keeping with this, we believe that each patient should be treated as an individual; we do not believe in one-size-fits-all medicine. Therefore, we are trying to assess the risks of every patient to determine what vaccines are necessary. We want to give them the vaccines they need, but not over-vaccinate them with vaccines they don't need. We will use your answers to the following questions to help us determine what vaccines your dog should receive today.

Please take a few moments to answer the following questions for the pet(s) we are seeing today.



Is your dog exposed to rodents, raccoons or other wild animals? **Yes**  **No** 

Is your dog likely to swim in or drink from freshwater ponds, lakes, rivers or puddles? **Yes**  **No** 

Is your dog allowed to roam outdoors, off of your property, unsupervised? **Yes**  **No** 

Will your dog be attending obedience classes, dog shows, dog parks or field trials? **Yes**  **No** 

Does your dog go to a professional groomer? **Yes**  **No** 

Do you plan to board your dog in a kennel within the next year? **Yes**  **No** 

Approximately how many ticks have you pulled off your dog in the last year? _____

What do you give your dog for heartworm and flea prevention? _____

Have you noticed any new or growing lumps on your pet? _____

What do you use for home dental care? _____

What types and brands of foods and treats do you feed your dog? _____

What other medications is your dog taking? (Drug name, strength, frequency) _____

Who is your Pet Health Insurance carrier? _____

If none, would you like information about Pet Health Insurance? **Yes**  **No** 