



AVIAN HISTORY/HUSBANDRY WORKSHEET



Please answer the following questions as accurately as possible. Health problems relating to improper housing and feeding are common among pet birds. Your answers will help us to recommend any changes that may influence your bird's well being. We will also provide you with a list of our recommendations for you to consider.

Owner _____ Driver's License# _____
Address _____ City/state/Zip _____
Home Phone _____ Work Phone _____
Cell Phone _____ Emergency Contact Name _____
Emergency Contact Number _____ E-Mail Address _____

How did you learn about our clinic? Yellow Pages ____ Recommendation ____ Sign ____ Other ____

If recommended, by whom? _____

Reason for visit: _____

Is this your bird's first visit to a vet? No ____ Yes ____

Patient Information:

Type of Bird: _____ Birds Name: _____

Age: _____ Sex: Male ____ Female ____ Unknown ____

Acquired from: _____ Captive Bred ____ Wild Caught ____ Unknown ____

1) How long have you had your bird? _____

2) Who is the bird's primary caregiver? _____

3) Do you have more than one bird? ____ If so, are they housed together or separately? _____

4) Have any of the birds been ill or died recently? _____

5) Describe your birds diet (i.e. seed, pellets, people food) _____

6) Where do you purchase your birds food? _____

7) Do you give your bird supplements? No ____ Yes ____

8) What kind and how are they administered? _____

9) How is your bird housed? (Type and size of cage) _____

10) What types of perches are in the cage (i.e. wood, rope, cement and what size are they)?

11) What type of toys are in your birds cage (i.e. puzzle, chewing, foot, climbing)?

12) Does your bird fly free? No ____ Yes ____

13) How often does your bird bathe, please describe? _____

- 14) Have there been any changes in your bird's environment? _____

- 15) What kind of substrate do you use in your bird's cage? (Sand, gravel, newspaper)

- 16) How often do you clean your bird's cage and what do you use? _____

- 17) How often do you change food and water dishes? _____
How often are they cleaned? _____
What do you use to clean them with? _____
- 18.) Has the bird been recently exposed to other birds? (Recent acquisition, boarding, pet-shop, show) Yes___ No___
- 19.) To your knowledge, is there a history of illness or injury? _____
- 20.) Has your bird been on any medications in the past or is it on any now?
No ___ Yes___ If yes, what kind _____
- 21.) What medication? _____ What dosage? _____
How was it administered? _____
- 22.) Has your bird been eating, drinking, and acting normally? No ___ Yes ___
If no, please explain _____

- 23) Have there been any changes in your bird's droppings? (Number, color, or consistency)
If yes, please explain _____
- 24.) Have you noticed any changes in your bird's behavior, if yes please explain? No ___ Yes ___

- 25.) Do you have any behavioral questions for the doctor? No ___ Yes ___
Please explain,

Authorization

I hereby authorize the veterinarian to examine, prescribe for, or treat the above-described pet. I assume responsibility for all charges incurred in the care of this animal. I also understand that these charges will be paid at the time of release and that a deposit may be required for treatment. As the FDA has not approved any medications for use on exotic pets, I am aware that medications prescribed are done so on an extra label basis and hereby give my consent. A finance charge of 2.0% will be added to any account more than 30 days past due. A \$25.00 fee will be added for any returned check. If we are required to submit your account to collections, a \$25.00 fee will be applied.

Signature _____ Date _____
Method of payment: Cash ___ Check ___ VISA ___ MC ___ Discover ___ AE ___ Care Credit ___