

CARVER STREET ANIMAL HOSPITAL  
2703 W. CARVER STREET  
DURHAM, NC 27705

**Assessing Your Pet's Risk to Disease**

As your veterinarian, we are interested in assessing your individual pet's risk to various diseases and tailoring a preventative protocol to protect your pet. Please answer the following questions for each of your pets:

<b>Please provide your Pet's Name:</b>	_____	_____	_____
<b>Please provide your Pet's Age:</b>	_____	_____	_____
<b>Please indicate if your Pet is a Dog or a Cat:</b>	_____	_____	_____
Does your pet go outdoors?	Yes / No	Yes / No	Yes / No
If your pet goes outdoors, is it ever unsupervised?	Yes / No	Yes / No	Yes / No
Does your pet have contact with other pets or their environments?	Yes / No	Yes / No	Yes / No
Is wildlife like mice, squirrels, birds, possums, raccoons or skunks in your area?	Yes / No	Yes / No	Yes / No
Have you seen ticks/fleas/mosquitoes in your area?	Yes / No	Yes / No	Yes / No
Do you travel with your pet to other areas of the U.S? If yes, where? _____	Yes / No	Yes / No	Yes / No
Does your pet ever drink from puddles, ponds or other standing water outdoors?	Yes / No	Yes / No	Yes / No
Does your pet sleep in the bed of any family member?	Yes / No	Yes / No	Yes / No
Does your pet go to a groomer, boarding facility, or dog shows or take training classes?	Yes / No	Yes / No	Yes / No
Is your pet used for hunting?	Yes / No	Yes / No	Yes / No
Is your pet spayed/neutered?	Yes / No	Yes / No	Yes / No
Have you ever missed a dose of your pet's monthly heartworm preventative by more than 2 weeks?	Yes / No	Yes / No	Yes / No

Thank you for your time!

\_\_\_\_\_  
Owner's signature

\_\_\_\_\_  
Date