

Recheck Visit Client Questionnaire:

Canine Clinical Signs Score¹

1. How do you rate your dog's attitude/activity level?

- A. Normal
- B. Slightly decreased but acceptable
- C. Moderately decreased (some activity but to eat, drink, urinate/defecate in acceptable areas)
- D. Severely decreased (reluctant to move but able; does not move to urinate/defecate in acceptable areas; eats if food is offered in place).
- E. Does not move (must be force-fed, needs help to stand/walk)

2. How do you rate your dog's appetite?

- A. Normal
- B. Slightly decreased (3/4 or more of normal; will still eat normal dog food)
- C. Moderately decreased (1/2-3/4 of normal; needs enticement or treats/novel food)
- D. Severely decreased (<1/2 of normal to absent; little to no interest in any food source)

If decreased, how many days? _____

3. How often does your dog vomit?

- A. Never (no vomiting within past four weeks)
- B. 1 time or less per week
- C. 2-3 times per week
- D. >3 times per week
 - If >3 times per week:
 - 1. <3 times in 24 hours
 - 2. 3-10 times in 24h/<5 in 48 hours
 - 3. Multiple episodes lasting >48 hours

4. How would you describe any signs of nausea?

- A. Decreased appetite but no change in eating habits
- B. Salivation or lip-smacking (<3 days)
- C. Salivation or lip-smacking (>3-5 days)
- D. Salivation or lip-smacking (>5 days)
- E. No signs of nausea

5. How would you describe your dog's stool?

- A. Normal (formed stool; able to be picked up)
- B. Slightly soft; presence of mucus or blood
- C. Very soft but still solid; with or without mucus or blood
- D. Liquid diarrhea; with or without mucus or blood

Presence of blood? _____ Bright red or black? _____

6. What is the frequency of your dog's defecation?

- A. Normal
- B. 2-3 times per day
- C. 4-5 times per day
- D. >5 times per day

7. How would you describe your dog's weight trends?

- A. No change in weight or weight gain
- B. Mild weight-loss (<5% body weight)
- C. Moderate weight-loss (5-10% body weight)
- D. Severe weight-loss (>10% body weight)

Please estimate the total pounds lost: _____ lb and period of time: _____ weeks/months

8. Any trouble swallowing? _____

9. Any flatulence? _____

Please answer the following questions:

1. Have you noticed any skin changes (e.g. rash, hair loss, redness, bruising, color change) or itching? Please describe _____

4. What medications is your dog taking? _____

5. What food does your dog eat? _____

6. What treats does your dog receive? _____

7. What supplements does your dog receive (e.g. glucosamine, probiotics)? _____

8. Any weakness/collapse since last visit? _____