



Vomiting/Diarrhea History Form

Vomiting and diarrhea are two of the most common symptoms that our animals display. There are multiple different causes of these symptoms, and treatment varies depending on these causes. Filling out this form will help us to treat your pet **more quickly** and **more effectively**, so please be as thorough as possible with your answers.

With EITHER Vomiting OR Diarrhea

How many sets of vaccinations **with a veterinarian** has your pet had? _____

When was the date of your pet's last vaccination? _____

Has your pet been fed any table scraps or human food in the last 5 days? **YES NO**

If so, what? _____

Is your pet:

a) acting lethargic? **YES NO** How long? _____

b) having decreased appetite or dull attitude? **YES NO** How long? _____

Is your pet on heartworm prevention?

If so, what? _____

Is your pet on any medications?

List: _____

Does your pet have any previous medical conditions?

List: _____

Has your pet gotten into the trash or been exposed to rat poison recently? **YES NO**

Vomiting

When did the vomiting start?

How many episodes **today** have there been?

Have you noticed any blood or coffee-ground-type substance in the vomit?

YES NO

Does your pet like to chew on non-food items? **YES NO**

If so, what?

Diarrhea

When did the diarrhea start?

How many episodes **today** have there been?

Have you noticed any blood? **YES NO**
Does the stool appear black or tarry?

YES NO

Has your pet been straining to defecate?

YES NO

Having frequent episodes of diarrhea?

YES NO