

# Citrus Park Animal, Bird & Exotics Hospital

## Guinea Pig Patients Clinical History Form

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Guinea pig's age: \_\_\_\_\_

Sex: \_\_\_\_\_

Does your GP live on its own or with another? \_\_\_\_\_

If female, has she been bred? \_\_\_\_\_

Does your GP live indoors or outdoors? \_\_\_\_\_

Does your garden back onto farm land? \_\_\_\_\_

If indoors, what type of central heating do you use? \_\_\_\_\_

Is there a gas appliance in the room where your GP lives? \_\_\_\_\_

If yes, when was it last serviced? \_\_\_\_\_

Has your GP been in wood shavings or sawdust? \_\_\_\_\_

Has your GP been dewormed every three months? \_\_\_\_\_

With BOTH Ivomec and Panacur? \_\_\_\_\_

Is your GP normally a good drinker? \_\_\_\_\_

Does it have a water bottle or a water pot? \_\_\_\_\_

Is the water bottle and spout brushed and cleaned on a regular basis? \_\_\_\_\_

Is your GP's cage wooden or plastic? \_\_\_\_\_

How often is the bedding changed? \_\_\_\_\_

How often is your GP shampooed? \_\_\_\_\_

What type of shampoo is used? \_\_\_\_\_

Is your GP allowed to graze outdoors? \_\_\_\_\_

Is the area checked for toxic plants prior to grazing? \_\_\_\_\_

What other animals do you have? \_\_\_\_\_

Is the storage container for their feed emptied and cleaned on a regular basis or just topped with fresh feed? \_\_\_\_\_

Is there any evidence of contamination from mice or rats, either where the animal lives or where the food is kept? \_\_\_\_\_

Does anyone in the family suffer from any skin complaint? \_\_\_\_\_

Does anyone in the family smoke? \_\_\_\_\_

Does anyone in the family either work on or visit farms or riding stables? \_\_\_\_\_

Has your GP been away from its normal environment recently? \_\_\_\_\_

Do you feed wild plants, if so from where do you gather them? \_\_\_\_\_

Have any of your other GP passed away within the last 3 months? \_\_\_\_\_