

**Cape May Veterinary Hospital  
(609) 884-1729**

**Small Mammal History Form**

**Date** \_\_\_\_\_

**Owner's Name** \_\_\_\_\_

**Patient Information:**

Pet's Name \_\_\_\_\_ Species (ie: ferret, rat): \_\_\_\_\_

Birth Date/Approx Age: \_\_\_\_\_ Colors/Markings: \_\_\_\_\_

Sex (**Check One**):  Male  Neutered Male  Female  Spayed Female  Unknown

How long have you had your pet? \_\_\_\_\_

Is today's visit for a wellness exam or a problem? If problem, please briefly describe:

\_\_\_\_\_

If your pet is sick or injured, when was he/she last normal? \_\_\_\_\_

Has your pet been sick previously?  **Yes**  **No** If yes, please describe \_\_\_\_\_

\_\_\_\_\_

Has your pet ever been seen by another veterinarian?  **Yes**  **No** If yes, please describe the approximate date and reason: \_\_\_\_\_

\_\_\_\_\_

Is your pet currently on any medication?  **Yes**  **No** If yes, please describe \_\_\_\_\_

\_\_\_\_\_

Have you noticed any of the following? (**Circle any that apply**)

weight loss - weight gain - masses/lumps - vomiting - any discharge - sneezing - diarrhea - difficulty breathing - excessive shedding - hair loss - scratching - skin sores - head tilt - loss of balance - limping - lethargy - decreased appetite - decreased stools - increased drinking

**Housing:**

How is pet housed? (glass aquarium, metal cage, loose in room) \_\_\_\_\_

Bedding(**please circle one**): Care Fresh - Yesterday's News - wood shavings (cedar or pine) - newspaper - other \_\_\_\_\_

Cage Accessories (**please circle**): sleeping box - house/cave - exercise wheel - shelves - chew toys - dust bath - sipper bottle - water bowl - play tubes - litterbox - other toys - hay hut

Is cage shared with another animal?  **Yes**  **No** If yes, what species? \_\_\_\_\_

**Diet:**

Are fruits, veggies, or greens offered?  **Yes**  **No** Any favorites? \_\_\_\_\_

Does your pet have constant access to hay?  **Yes**  **No** If yes, which kind? (alfalfa, timothy oat, orchard grass, mixed, etc) \_\_\_\_\_

Is your pet offered a pellets?  **Yes**  **No** If yes, what brand? (Hartz, Oxbow) \_\_\_\_\_

Do you offer any treats?  **Yes**  **No** If yes, list any favorites: \_\_\_\_\_