



Diet History Form

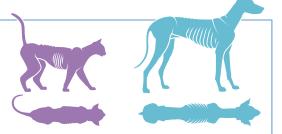
Today's Date:	
Please tell us about your pet:	
Pet Owner's Name: Pet's Name:	
Species: Age:	
Gender: M F Spayed or Neutered? Yes No	
How active is your best friend? Extremely active Moderately active Fairly sedentary	
How would you describe their weight? Overweight Slightly overweight Ideal Too thin	
Current Feeding Regimen:	
What is your pet's preferred treat texture? Select all that apply: Crunchy Chewy Lickable (e.g., peanut butter, whipped cream)	
Other (please specify):	
What is your pet's preferred food texture? Select all that apply: Kibble Semi-moist Canned	
Other (please specify):	
What is their standard eating behavior (inhales food, grazes, must be coaxed to eat, etc.)?	
Do you include any of the following in your pet's food setup? Select all that apply: Nonslip surface Secure bowls Low-traffic area of home	Food puzzle
Other (please specify):	
Are there multiple pets in the home? Yes No If yes, how are they fed? Separately Together	
And what behavior do they exhibit with food around other pets?	
Other (please specify):	
How do you measure your pet's food? Measuring cup Arbitrary scoop Bowl filled to capacity Food scale	
How do you feed your pet? Set meals Food available at all times	
Is anything else added to the pet's meal?	
Other (please specify):	
TO BE COMPLETED BY YOUR VETERINARIAN:	
Current weight: Ideal weight: Body Condition Score:	
Muscle condition: Normal Mild wasting Moderate wasting Severe wasting	
Notes:	



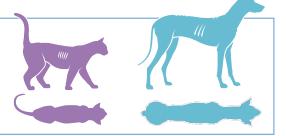


Body Condition Scoring Chart

Visible ribs, lumbar vertebrae and pelvic bones; no palpable fat.



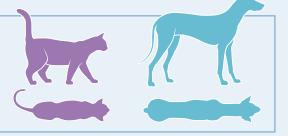
Ribs easily palpated and may be visible with no obvious fat. Tops of lumbar vertebrae visible; pelvic bones more prominent.



IDEAL WEIGHT

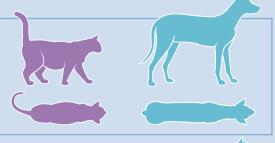
UNDERWEIGHT

Waist visible behind ribs; minimal abdominal fat.



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Heavy fat cover; difficulty palpating ribs. Waist barely visible or absent.



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OVERWEIGHT

Massive fat deposits over entire body. Distended abdomen. Absent waist.

