

Kitten Biography



Kitten's Name: _____ Nickname: _____

Owner's Name: _____ Date of First Visit: _____ Sex: _____

KITTEN'S 1ST VISIT

- Where/when was the kitten obtained? _____
- Diet currently fed _____ Amount _____ Times per day _____
- Comprehensive physical exam / Owner's concerns _____
- Behavior problems/concerns _____
- Litterbox training & discuss types of litter _____
- Previous vaccinations _____
- Vaccinations due today? FVR-CP / LEUKEMIA / FIV _____
- Previous wormings / wormings due today? _____
- Direct Fecal plus Fecal Centrifugation results _____
- Previous medications _____
- Current medications _____
- Have you started Heartworm prevention? Yes No
- Have you started Flea control prevention? Yes No
- Indoors / Outdoors / Show / Breeding (circle all that apply)
- Housemates? _____
- FELV / FIV Test
- Teach "Messing with kitten" routine
- Trim Nails
- New client pack / New kitten pack / Reviewed emergency phone number
- Enrollment in pet insurance
- Review kitten basket of recommended products
- Next vaccination/visit in _____ weeks

KITTEN'S 2ND VISIT

- Wellness comprehensive physical exam _____
- Health concerns _____
- Behavior problems/questions (review "messing with kitten") _____
- Diet currently fed _____ Amount _____ Times per day _____
- Fecal due / worming due today _____
- Review enrollment in pet insurance
- Nail trim / Clean ears / Brush teeth
- Flea control
- Heartworm preventative
- Spay / Neuter benefits / Tour of surgery room and hospital
- Vaccinations due: FVR-CP / LEUKEMIA / FIV
- Toy and handout
- Next visit / Vaccinations / Procedures due in _____ weeks

KITTEN'S 3RD VISIT

- Wellness comprehensive physical exam _____
- Questions _____
- Review behavioral questions _____
- Heartworm / Fecal / Flea / Parasite control
- Vaccinations due: FVR-CP / RABIES
- Hysterectomy / Neuter appointment date _____
- Reminder noted in computer