



Reptile Questionnaire

*Please fill out as much of the information below as possible.
A full background is essential in helping us work toward the diagnosis of any problem.*

Appointment date _____ Owner's name _____ Email _____
Phone numbers _____

Pet Information

Pet's name _____ Species _____ Age _____ Sex if known _____
Place of acquisition _____ Age at acquisition _____ Captive born or wild caught? (circle)
Problem(s) _____

Cage Information

Dimensions and type of cage _____
Substrate (bark chip/paper/sand/corncob/reptile felt, etc.) _____

Heat source(s) _____

Temperature range/cycle (day/night and temperature gradient in tank) Do you have temperature gauges in the tank? _____

Any **UVA/UVB** light source(s)? How often is it changed? _____

Photoperiod/cycle (How long is the UVB light left on if appropriate species?) _____

Humidity, if measured _____

Aquatic? If so, do you have a water temperature gauge and/or a water filter? _____

Any cage or tank mates? _____

Any other pets? _____

Is your reptile ever allowed outside? If so, in what type of enclosure? Is there access to shade? _____

What type of product do you use to clean the cage? How often? _____

Does your reptile have a hide box? _____

Any branches if applicable? If so, what type of wood? _____

Diet

What and how much does your pet eat? _____

Where do you buy the food? _____

How often do you feed and/or replace uneaten food? _____

If fed rodents, are they fresh thawed or alive? _____

Do you give any supplements (e.g., vitamins/minerals), treats, or table food? How often? _____

What type of water source do you use? _____

If using a water bowl, what are the depth and dimensions? _____

Do you ever soak or spray your reptile? How often? _____

Health

Any previous illnesses? _____

How long has your reptile been ill? _____

Is it eating? If not, when was the last time it ate? _____

Does it appear to be losing weight? _____

Is it vomiting? _____

Is it producing feces? How often? When was the last stool? _____

Any evidence of diarrhea? _____

If a snake or appropriate species of lizard, when was the last time it shed? Any problems shedding? _____

Does your reptile ever appear itchy (rubbing on rocks, etc.)? _____

Have you noticed any new lumps or bumps on your reptile? _____

Any difficulty breathing or discharge from the eyes or nose? _____

Has he/she had any medications or does he/she get supplements (including dewormers or vitamins)? If so, what and from where? _____

Has your pet had access to any potential toxins, for example grass treated with herbicide/pesticide, toxic plants, or foreign objects? _____