	Patient Name:	Date:
1.	Dermatology Question What breed is your pet?	naire
2.	How old was your pet when clinical signs were first reco	ognized?
3.	How long has the condition been present and how did it	progress?
4.	Where on the body did the problem start?	
5.	Is your pet itchy?	
6.	Is the condition seasonal?	
7.	Are there other clinical signs such as sneezing, coughing	g, or diarrhea?
8.	What food do you feed your pet? Have you ever used a and how long was it fed exclusively?	special diet? If so, what was it
9.	Are there other pets in your household? Are they showing	ng in similar clinical signs?
10.	Does anyone in your household have any skin diseases?	
11.	Has your pet's skin condition been treated before? If so, successful was the treatment?	, which drugs were used and how
12.	Is your pet on a flea prevention? If so, what product are dose given?	you using and when was the last
13.	If your pet has previously been treated for a skin condition medication given?	on when was the last dose of
14.	Does your pet get better with a change of environment (a laws for example)?	a weekend or day away at the in-