

New Puppy Questionnaire
(To get to know your fur-baby better!)

Date: _____ Owner Name: _____ Patient Name: _____

1. **When did you get your new puppy and from where?**

2. **Any other pets in the household?**

3. **Is this your first time owning a dog? This breed?**

4. **What kind of food are you feeding your puppy? How much and how often? How is his/her appetite?**

5. **Please list the toys and treats you are giving to your puppy.**

6. **Are you giving your puppy any medications or supplements (include heartworm, flea, or tick prevention)?**

7. **How is potty training going? Are you crate training?**

8. **Have you considered enrolling your puppy into training classes, or are you currently enrolled? If so, where?**

9. **Are you planning on having your puppy spayed/neutered if not already?**

10. **How is your puppy adjusting to her/his new home?**

11. **Please list any concerns you would like to discuss with the veterinarian today.**
