# TCVM QUESTIONNAIRE

- **What are your main concern:**

- **Please make a mark next to the 5-10 traits that are most consistent with your pet’s personality and being**

  - Decisive
  - Assertive/Confident
  - Irritable/Aggressive
  - Strong
  - Impulsive/Impatient
  - Athletic-Stamina
  - Barks
  - Bites with little provocation
  - Joyful/Outgoing
  - Lively/Excitable
  - Communicative
  - Very Friendly
  - Affectionate
  - Loves to be petted
  - Center of the party
  - Vocal
  - Relaxed, laid back
  - Sociable/Friendly
  - Round and large
  - Loyal/Eager to please
  - Serene and balanced
  - Worrisome
  - Cares for others (motherly)
  - Likes comfort
  - Quiet/Intelligent
  - Loves order
  - Obey the rules
  - Aloof/Self sufficient
  - Symmetrical body
  - Disciplined attitude
  - Good haircoat
  - Takes the lead
  - Takes the lead
  - Likes to hide
  - Meditative
  - Slow/Consistent
  - Insecure

- **Please make a mark next to the problems your pet has. Please circle your main concern(s)**

  - Ligament problems
  - Liver problems
  - Red eyes
  - Angers easily
  - Ear problems
  - Nail problems
  - Footpad problems
  - Anal sac issues
  - Seizures
  - Problem worse spring
  - Problem worse summer
  - Problem worse late spring
  - Prob occurs 11pm-3am
  - Prob occurs 11am-3pm
  - Prob occurs 7am-11am
  - Prob occurs 7pm-11pm
  - Insomnia
  - Separation anxiety
  - Restless/Hyperactive
  - Noisy
  - Mental disturbance
  - Pants, seems hot
  - Rapid heart rate
  - Heart problems
  - Heat intolerant
  - Diarrhea
  - Constipation
  - Loss of appetite
  - Obesity
  - Vomits
  - Gum disease
  - Weak muscles
  - Over eats-obese
  - Worries
  - Asthma
  - Dry skin
  - Sinus problems
  - Breathing disorders
  - Nose problems
  - Nasal discharge
  - Cough
  - Weak voice
  - Depressed/Grief
  - Problem worse fall
  - Prob occurs 3am-7am
  - Prob occurs 3pm-7pm
  - Rear weakness
  - Fearful
  - Arthritis
  - Bone and back issues
  - Urinary problems
  - Disturbed growth
  - Deafness
  - Bad teeth
  - Dislikes cold
  - Problem worse winter
  - Problem worse winter

- **How long has the problem been going on?**

- **When did the problem begin?**

- **Has it changed over time?**

- **Habitat:**
  - [ ] Indoor
  - [ ] Outdoor
  - [ ] Indoor/Outdoor
  - [ ] Direct contact with other animals

- **Diet:**

- **Medication(s)/Supplements:**
  - [ ] No
  - [ ] Yes

  - What and when last given

  - Response to medication/Supplements
WEIGHT:  □ Normal  □ Increased  □ Decreased
ACTIVITY: □ Normal  □ Increased  □ Decreased
APPETITE: □ Normal  □ Good / ravenous  □ Good / finicky  □ Poor or decreased
WATER INTAKE: □ Normal  □ Thirsty  □ Less thirsty  □ Prefers cool water
URINATION: □ Normal  □ Short stream, bloody, malodorous  □ Long stream or leakage
STOOLS: □ Normal  □ Loose  □ Watery  □ Constipated  □ Dry  □ Bloody  □ Mucous  □ Malodorous  □ Incontinent
VOMITING: □ None  □ Frequent  □ Sporadic  □ With digested food  □ Just after eating  □ Large volume  □ Small volume
TEMP PREF: □ None  □ Shade or Cool (concrete/tile)  □ Sunny or Hot (carpet)
SLEEP: □ Normal  □ Too much  □ Too little  □ Wakes up owner or vocalizes  □ Muscle jerking during sleep  □ Likes Soft bed  □ Likes Hard bed
STIFFNESS: □ Acute  □ Chronic
Worse: □ in am  □ in pm  □ with cold  □ with heat  □ with damp  □ after walk  □ before walk

PHYSICAL EXAM:

SHEN: □ OK  □ Great  □ Good  □ Loss  □ Disturbance
TONGUE COLOR: □ OK  □ Pale  □ Red  □ Pale Pink  □ Deep red  □ Purple  □ Yellow  □ Thin  □ Thick  □ Greasy
TONGUE COAT: □ OK  □ Pale  □ Dark  □ Yellow  □ Thin  □ Thick  □ Greasy
TONGUE MOISTURE □ OK  □ Dry  □ Wet  □ Small  □ Swollen
PULSE: □ Floating  □ Deep  □ Fast  □ Slow  □ Forceful  □ Weak
□ Thin  □ Slippery  □ Choppy  □ Soft  □ Wiry
HAIR/SKIN: □ Dry  □ Pruritis  □ Hot  □ Cold  □ Alopecia  □ Dandruff  □ Malodorous  □ Poor follicle
EARS: □ OK  □ Hot  □ Cold  □ Red  □ Scratching  □ Alopecia
□ with odor  □ with blood  □ with pus  □ other
EYE: □ OK  □ Red  □ Pale  □ Yellow  □ Itchy  □ Swollen  □ Dry
□ with odor  □ with blood  □ with pus  □ other
NOSE: □ OK  □ Thick  □ Watery  □ Purulent  □ Dry  □ Crusting  □ Depig
□ Hot  □ Cold  □ Wet  □ Bloody  □ other
GUMS: □ OK  □ Pale  □ Red  □ Swollen  □ Foul odor  □ Bloody  □ Pale  □ Purple  □ Ulcers
LIPS: □ OK  □ Pale  □ Red  □ Purple  □ Ulcers  □ Foul odor  □ Hot  □ Cold
ORAL CAVITY: □ OK  □ Dry  □ Wet  □ Ulcers  □ Foul odor  □ Hot  □ Cold

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