

Dunckel Veterinary Hospital

Reptile Questionnaire

(810) 653-3988

DunckelVet.com

PET INFORMATION

Name: _____

Species: _____

Age: _____

Sex: _____

Where did you get him/her from? _____

How long have you had him/her? _____



The Standard of
Veterinary Excellence

ENVIROMENT QUESTIONS

Type of enclosure (aquarium, screen, custom, etc): _____

Substrate (bark, reptile carpet, newspaper, sand, etc): _____

Heat source: _____

Temperature range during the day: _____

Temperature range at night: _____

How is temperature controlled? _____

How is temperature monitored? _____

Do you provide UVB: _____

If so, how often do you change the bulb? _____

Are the lights turned off at night? _____

If aquatic (turtle, etc) do you have a temperature gauge in the water? _____

If aquatic, what type of filter is used? _____

Do you house your reptiles together? _____

Does your reptile ever go outside? _____

Does your reptile have access to a hide? _____

How often do you clean the enclosure? _____

What do you use to clean the enclosure? _____

DIET

What do you feed your reptile? _____

How often? _____

If feeding rodents, are they live, pre-killed or frozen? _____

What supplements do you give? How often? _____

How do you provide water? (bowl, drip system, etc) _____

Do you ever soak your reptile? _____

HEALTH

Any previous illness? _____

Is your reptile eating? _____

If not, how long has it gone without food? _____

Does it appear to be losing weight? _____

Is it producing feces? _____

When did it shed last? _____

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

Has your reptile ever been dewormed? _____

Have you tried any treatments from the pet store?

