

Holistic Dog Nutrition and Health Care Consulting



REIKI HEALING - HERBAL REMEDIES - BACH FLOWER THERAPY

info@katerinasnaturalway.com



www.katerinasnaturalway.com



Katerina's
NATURAL WAY

QUESTIONNAIRE

YOUR ANIMAL'S INFO:

Animal's Name: _____ D.O.B.: _____

Breed: _____ Sex: _____ Intact / Spayed / Nuted (mark)

Weight: _____ (kg or lbs) Activity Level: _____

Please, state the reason for your natural health care/nutrition consultation inquiry:

DIET:

List your dog's current diet composition and amount, including supplements:

If using commercial processed pet food (kibble or canned food), state brand, formula, amount:

How long is your dog on the current diet?: _____ How many times/day do you feed: _____

What treats/rewards do you give your dog: _____

Is his/her current weight stable: _____ Has the dog lost/gained weight recently: _____

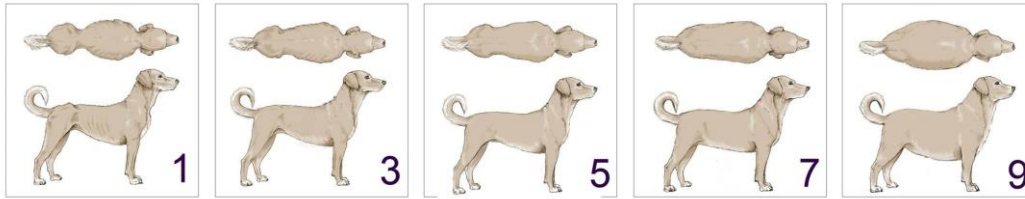
Is keeping weight / losing weight / gaining weight an issue?: _____

Does your dog suffer from any of the following?: Diarrhea / loose stool / slimy stool / constipation

What color is it?: _____ Is it regular?: _____ How frequent?: _____

HEALTH:

Which number from the dog body condition chart below best fits your dog?: _____



State your dog's current medical issues: _____

Currently given medications/treatments: _____

Are recent blood test results/x-rays available?: _____ If yes, what do they say?: _____

You can also email the result copies to consulting@kipdamundsen.com

Does your dog experience any of the following?:
allergies / exema / hot spots / itchy skin / excessive licking / scratching / smelly or greasy coat / dandruffs / discharge from eyes / ear infections / discharge from vulva / smelly breath / tartar build up on teeth?
Please mark

When do any of the above get worse?: _____
(example: summer, winter, rainy weather, cold weather, hot weather, etc.)

How often and against what diseases is your dog vaccinated: _____

How often is your dog dewormed/what dewormer: _____

BEHAVIOR AND ATTITUDE:

Describe the attitude and personality of your dog: _____

Describe any unusual habits and behavior patterns: _____

YOUR CONTACT:

Your Name: _____

Email address: _____

Phone number including country code: _____

Address: _____