



**CASCADE SUMMIT**

*Animal Hospital*

## Telemedicine Request

Pet Name:

Client Name:

Name & Phone Number for Decisions:

Email:

Do you have a time request?

What options do you have for a video call?

- Facetime
- Skype
- Google Hangout
- Google Duo

For today's visit the following symptoms are present:

- No symptoms present
- Coughing  Sneezing  Vomiting  Diarrhea  Lethargy  Lameness  Itching  Lumps/Bumps
- Other Symptoms/Concerns (list):

Monthly heartworm / deworming / flea preventive:

- None
- Trifexis  Interceptor Plus  Heartgard  Nexgard  Bravecto
- Revolution  Cheristin  Vectra  Frontline  Advantage

Current medications/supplements and dose given:

Diet:

Appetite:  normal  decreased  increased

Any change in food/treats?  No  Yes

Water intake:  normal  decreased  increased

Activity Level =  normal  abnormal

Food Allergies?

Other Allergies?

Any seizures?

Percentage of time spent indoors:

History:

- How is your pet doing at home?
- Have you noticed any changes to their normal behavior?  Yes  No
- What concerns that you would like to address today?
- Do you need any medication refills?  Yes  No
- Other:

Please attach pictures/videos you would like reviewed.