

Reptile History Form

Reptile's Name:

Sex:

Species:

Does the reptile have any specific identification (e.g., tattoo, microchip)?

If the reptile is a female, has she produced eggs or given birth in the past? If yes, please describe:

Reptile is a: ___Pet ___Breeder

How was the reptile acquired? ___Store ___Breeder ___Other (describe)

Date Acquired:

Are there any other pets in the house? ___Yes ___No

If yes, please specify, including ages and when acquired:

When did the reptile last shed its skin?

Did the shed appear normal (describe)?

Housing

Where is the reptile kept (specify percentage of time in each location)?

Indoors _____ % Outdoors _____ % Roam free in house _____ %

Describe the reptile's enclosure (i.e., size, materials, substrates):

Is the reptile housed alone? ___Yes ___No If no, describe:

What is/are the heat source(s)?

List enclosure temperatures: High End temp: _____ Low End Temp: _____

Temp at Night: _____ Basking Site Temp: _____

Humidity: _____

How are heat and humidity measured in the cage?

How is humidity provided?

What is/are the light source(s) (describe hours of use)?

Is there a UVB or Full-spectrum light source? Please describe (including hours of use and how close is the light to the animal):

What substrate and other objects are in the cage (e.g., sand, gravel, newspaper, PVC, wood, hiding spots)?

How often is the cage cleaned? Using what products?

Method/frequency of cleaning food/water dishes:

Does the reptile hibernate (if applicable)?

If yes, where and for what time period?

Has the reptile's environment changed recently? ___Yes ___No If yes, describe:

Is the reptile ever soaked? ___Yes ___No If yes, how often? _____ Where?

Diet

What foods are offered to the reptile and in what total percentages (e.g., 50% green leafy vegetables, 30% crickets)?

If live insects are fed, are they offered food ("gut loaded") before being fed to the reptile?

If so, with what product?

Any vitamin or mineral supplements offered? If so, list brands:

Are any treats offered? What Type? How often?

Have there been any recent changes or new foods? ___Yes ___No If yes, describe:

How is water offered (e.g., sipper bottle, bowl, dropper)?

Reason for Today's Visit:

What signs have you noticed that promoted today's visit?

How long have you noticed the problem?

Has the reptile been sick previously?

Has the reptile been seen by any other veterinarian? Yes No If yes, where and why?

Have any tests been conducted previously on the reptile?

Blood work Fecal parasite test Skin parasite test X-rays Others

(please describe):

Additional Comments: