



Reptile Environment Form

Owner _____ Patient _____ Date of Birth / Hatch _____

Telephone _____ Circle 1: Snake Lizard Turtle Tortoise
Bearded Dragon Chameleon Other _____

Breed _____ Color _____ Sex: M F

Before examining your pet, we would like some additional information regarding his or her housing and diet. These two factors are important to the health of your pet, and vary greatly from house to house.

Date _____ Completed by _____

Housing

Size and type of enclosure _____

Location in house/apartment _____

Substrate (what's on the bottom?) _____

Frequency cleaned _____

Cage furniture (hide boxes, tunnels, etc.) _____

Water source (size and depth) _____

Drinking water – how is it provided (i.e., Chameleon drip system) _____

How often is water changed? _____ How frequently cleaned? _____

Temperature (average) _____ Is a gradient provided? _____

Humidity _____ Is hygrometer used to asses? _____ How is it maintained? _____

Heat source(s) _____ Where placed? _____

UV light source(s): Where placed? _____ Brand _____ Hours/day on/off _____ Timer? _____

Other light source(s) _____ Hours/day on/off _____ Timer? _____

Diet

1. Carnivores/Omnivores

Size/type of prey _____

Frequency fed _____

Insects _____

Live, dead, or stunned? _____

Is pet removed from cage to eat? _____

2. Herbivores/Omnivores

What is fed? (approx. amount) _____

Percent of diet (i.e., 50% romaine, 10% carrots) _____

What is actually eaten? _____

Favorites? _____

Frequency fed? _____

Where is food located in environment? _____

3. Please draw/sketch environment/cage on the back of this sheet.