

Name:

## Skin Problem Questionnaire

Patient's name: Phone Number:	
1.	At what age did the itching begin?
2.	Where are the primary areas your pet is itching?
3.	Is the problem seasonal?
4.	If itching is year round, are there certain months that the itching is worse? What month does it start? End?
5.	Is the itching worse at any specific time of the day or night?
6.	Is the itching worse after your pet has been outside?
7.	How much time does your pet spend outside?
8.	Where does your pet sleep?
9.	What type of material (fabrics, fillings, etc.) does your pet sleep on?
10	Do you have carpet/upholstery/much clothing of wool material?
11	I. If your pet is an outside pet, does he/she have access to a garage, cat/dog house, or other enclosed environment?
12	2. What type of grasses and trees are in the yard or your pet's access area?
13	3. Do you have problems with ants or houseflies?  Occasionally present or continuous?

14. Do you use insecticides around the house and/or yard?

- 15. Are there other pets in the environment (number and species if "Yes")?
- 16. Are these other pets your family members, or just in the neighborhood?
- 17. Does your pet have a history of any ear problems? If "Yes", were the ear problems present prior to the skin problems?
- 18. Is there a history of other pets or people in the household with skin problems?
- 19. Do your pet's relatives have a history of skin disease?
- 20. How long has your pet lived in this area?
- 21. On average, how many bowel movements does your pet have per day?
- 22. What diet is your pet presently eating? Has an elimination diet trial been done? If "Yes", what diet was used?
  - 23. Did the redness of the skin occur before the itching or visa versa?
- 24. What was your pet's response to the food trial?