

AVIAN HISTORY FORM

General History

Bird's Name: _____ Sex: M _ F _ Unknown _____

How was the bird sexed? Blood Test ___ Surgical ___

Any Specific Identification? (ie: tattoo, band, microchip) _____

If female, has she produced eggs in the past? (if yes, please describe) _____

Bird is a: Pet ___ Breeder ___ Other (describe) _____

How did you acquire the bird? Store ___ Breeder ___ Other (describe) _____

Date acquired? _____

Do you have any other pets? _____

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

Housing

Is this bird kept: Indoors ___ Outdoors ___ Both ___ (if both, please specify %)

How is your bird housed? Cage ___ Aviary ___ Free in the house _____

Is the bird housed alone? Yes ___ No ___ If no, describe _____

If bird is caged, what type of cage? _____

What do you use on the bottom of the cage? _____

How often is the cage cleaned? _____

Method/frequency of cleaning food/water dishes: _____

Any toys in the cage? Yes ___ No ___ If yes, describe _____

Has the environment changed recently? Yes ___ No ___ If yes, describe _____

At night, do you cover the bird? Yes ___ No ___

How many hours of darkness does the bird have each day? _____

Diet

What foods are offered to your bird/in what total %? (ie: 50% seed, etc.)

What % of these foods do you remove from the cage at night? _____

Any supplements offered? Brand name? _____

Any treats offered? Type? How often? _____

Any recent diet changes or new foods? Yes ___ No ___ If yes, describe _____

How is water offered? (ie: sipper bottle, bowl) _____

Reason For Today's Visit

What signs have you noticed that prompted today's visit? _____

How long have you noticed the problem? _____

Has your bird been sick previously? _____

Has the bird ever been seen by any other veterinarian? Yes ___ No ___ If yes, when/why? _____

Have any tests been performed previously on your bird? Please circle all that apply:
Psittacosis; CBC; Psittacine Beak and Feather Disease; Polyoma Disease; Parasites;
Other Bloodwork; Other: _____

Additional Comments (your comments regarding the reason for this visit): _____