



# ANIMAL MEDICAL CLINIC

4020 South Babcock Street  
Melbourne, FL 32901  
Animal-Medical-Clinic.com

## Feline

### Risk Factor Questionnaire

Patient Name: \_\_\_\_\_



Date: \_\_\_\_\_



**Our vision at Animal Medical Clinic (AMC) is to be the leading veterinary practice in Brevard County,** providing top quality service and the best in medical care for your pet. The American Association of Feline Practitioners publishes guidelines for wellness care that include recommendations for vaccinating cats based on their risk factors. This fits with our belief that each patient should be treated as an individual; we do not believe in one-size-fits-all medicine. Therefore, we try to assess the risks of every patient to determine what vaccines are necessary. We want to give them the vaccines they need, but not over-vaccinate them with vaccines they don't need. We will use your answers to the following questions to help us determine what vaccines your cat should receive today.

**Please take a few moments to answer the following questions for the pet(s) we are seeing today.**

Does your cat go outdoors? Yes  No 

Does your cat come in contact with other cats that go outdoors? Yes  No 

Have you noticed any changes in how active your cat is—such as jumping onto higher surfaces, using stairs, or running and chasing? Yes  No 

Have you noticed any new or growing lumps on your cat? Yes  No 

What kind of heartworm and flea prevention do you use for your cat? \_\_\_\_\_

What types and brands of foods and treats do you feed your cat? \_\_\_\_\_

What other medications is your cat currently taking? \_\_\_\_\_  
(Drug name, strength, frequency)

Who is your Pet Health Insurance carrier? \_\_\_\_\_

If none, would you like information on Pet Health Insurance? Yes  No 