

Initial Avian Medical History

Technician _____ Date _____

Signalment Plus

- Species _____
- Hatch date/approximate age _____
- Sex and how it was determined – Female/Male _____
- How long have they owned the bird? _____
- Where did they obtain him from? _____
- Was he quarantined at time of purchase? – Yes/No
- Is he hand tamed? – Yes/No
- Is he fully flighted? – Yes/No
- Any past medical problems? - Yes/No If yes describe _____
- Any other pets at home? - Yes/No If so what are they? _____
- Have any of your pets died recently? – Yes/No If yes list cause of death and when _____
- Are there any cigarette smokers in the home? – Yes/No

Presenting Complaint-Ill Visit

- What is the bird presenting for today? _____
- How long has it been going on? _____
 - Is the problem progressing, getting better or staying the same?
- Is he eating/drinking like normal? – Yes/No If not describe _____
- What is the consistency of the droppings? _____
- Any other pets or people sick at home? – Yes/No If yes who and what illness _____
- Any change in life style? – Yes/No If yes describe _____
- Has there been any weight change? Yes/No Increase/Decrease

Diagnostic History (Have these tests been completed, date and results)

- Chlamydiosis and Psittacine Beak and Feather Disease test – Yes/No
Date _____ Results _____
- Avian Fecal Profile – Yes/No
Date _____ Results _____
- Culture and Sensitivity cloaca or choanal slit – Yes/No
Date _____ Results _____
- Chemistry and CBC panel – Yes/No
Date _____ Results _____

Diet

- How is his appetite? _____
- What brand of food is he eating? _____
Pellets/seed?
Natural/Organic/Flavored?
- Type of avian treats _____
- How much food is offered daily? _____
- How much of the food is consumed? _____
- Are any human foods offered? – Yes/ No If so what kind and how much?

- Do they receive any vitamins? – Yes/No
What kind? _____
How often? _____
Are they given in food/water/by mouth?
- Describe their water consumption. _____
- How often is the water changed? _____
- Is the water offered in a bowl or water bottle?
- What type of water is offered? Tap/bottled/distilled
- Is he on any supplements? – Yes/No If yes please list name and dose. _____

- Remember NO caffeine, alcohol, avocado, parsley, or chocolate, these have been known in some cases to be toxic to birds.**

Behavior

- Describe the bird's personality. _____

- Has his attitude changed? – Yes/No If so please describe the change. _____

- Has his voice changed? – Yes/No If so please describe the change. _____

- Describe the bird's molting habit.

- Describe the bird's sleeping patterns?

- Does he forage? Yes/No

Grooming (Is he in the need of)

- Nail trim – Yes/No
- Beak trim – Yes/No

- Wing clip – Yes/No
- Does he bathe? – Yes/No If so how often? _____

Cage

- Describe the cage in detail
 - Size _____
 - Brand or material cage is made of _____
 - Location _____
- Perch material - Manzanita/ribbon wood/wooden dowel/ceramic/nylon/other _____
 - Quantity _____
 - Location _____
- Bowl material – Ceramic/metal/plastic/glass/other _____
 - Quantity _____
 - Location _____
- Toy material – Hardwood/softwood/plastic/rubber/chains/cardboard/rope/other _____
 - Quantity _____
 - Location _____
 - Does he play with toys? – Yes/No
- What type of substrate is used for cage lining? Newspaper/corncob/sand/gravel/cedar/other _____
- How often is the cage cleaned? _____
 - Water bowl cleaned? _____
 - Food bowl cleaned? _____
 - Perches cleaned? _____
- Describe the color and consistency of the droppings. _____
- Are there any cage mates? - Yes/No If yes, how many and species? _____
- Is the cage covered in the evening? – Yes/No
- What is the light cycle, does he get 12-14 hours of darkness? - Yes/No
- Do they spend any time out of their cage? – Yes/No
 - If so where are they when out of their cage? _____
 - Are they unattended when out of their cage? – Yes/No
- Do you take him outside? - Yes/No
 - If so, is he caged? - Yes/No
 - Is he protected from the environment? - Yes/No