

Steady Companion New Client Intake Form

Instructions & Guidelines:

- Complete the following Steady Companion New Client Intake Form to the best of your ability.
- Email the completed form to cheri@steadycompanion.com no later than 24 hours prior to your animal's scheduled appointment.
 - This allows sufficient time for us to review the form, and identify any follow-up questions in advance of your scheduled appointment.
- We request your transparency in terms of any known medical conditions, behavior issues, etc.
 - We work with intact animals, as well as animals with behavior challenges, bite histories, and fear of Veterinary situations.
 - This will allow us to create a plan to work most effectively, and successfully, with you and your animal.
- All questions pertaining to a recent illness, injury or surgery are to confirm your animal is no longer experiencing any contraindications, has the appropriate Veterinary release, and able to receive body or energy work services.
- If your animal has been diagnosed with a chronic condition, we may require a release from your primary or Specialist Veterinarian prior to working with your animal.

Client Data / Intake Information					
Date:		Owner's Name:			
Owner's Address:		City:	State:	Zip:	
Client's Name:		Phone:	Email:		
Breed:	Color:	Male: <input type="checkbox"/> Female: <input type="checkbox"/>	Age:	Weight:	
Years with Owner:		Previous Home(s):		Referred By:	
Reproductive Status:	<input type="checkbox"/> Intact	<input type="checkbox"/> Spayed	<input type="checkbox"/> Neutered		
Treatment Goals & Objectives					
<i>What Goals & Objectives Would the Owner Like to Achieve? Summarize primary complaints or issues:</i>					
List Owner's Goals & Objectives: [Summarize primary objectives and goals for the session(s).]					
Veterinary Contact Information					
Veterinarian's Name:			Clinic Name:		
Phone:	City:	State:	Email:		
General/Overall Lifestyle					
<i>List information about general health, lifestyle (including activity level), diet/nutrition/supplements:</i>					
Exercise/Activity Level: [List types and frequency of exercise. Include walks, event participation, dog park visits, etc.]					
Diet /Appetite: [List type, amount, and frequency of meals including any eating habits. Include any treats if applicable.]					

Supplements: [List all supplements, including dosage and frequency.]

Environmental Influences/Lifestyle: [List overall lifestyle including relationship with humans and other animals. Have there been any recent changes to their home life?]

Emotional History: [Summarize animal's general emotional state. List any behavioral changes, recent or past trauma, history of abuse or biting?]

Health History & Current or Past Issues

Include any regular medications, current or past treatment, illnesses, injuries, surgeries, etc.:

Up to Date on Shots or Have Current Titer Results?

Medications: [List all medications, condition(s) being treated, dosage and frequency.]

Joint/Orthopedic Problems: [List known orthopedic or joint issues.]

Current/Previous Treatments or Modalities: [List treatments your animal has received to date including frequency. Have they had any bad experiences with body / energy work or Veterinary care?]

Current/Past Allergies: [List any past, current or chronic allergies your animal has/is experiencing. Were they formally diagnosed by a Veterinarian?]

Current/Past Illnesses: [List any past, current or chronic illnesses your animal has/is experiencing. Were they formally diagnosed by a Veterinarian?]

Current/Past Injuries: [List any past, current or chronic injuries your animal has/is experiencing. Were they formally diagnosed by a Veterinarian?]

Recent /Past X-Rays: [List any X-rays your pet has had to date and why. Include OFA clearances if applicable.]

Recent/Past Surgery: [List any recent or past surgeries, the date and issue treated. Include spay or neuter date (if known/applicable). If recent, do you have a release from your Vet approving body or energy work treatments?]

Additional Information/Comments: [List any diagnosed structural or genetic issues for the animal's breed, e.g., TVD or other heart issues, or any past issues with Heartworm, Parvo or Distemper?]

For Swim Therapy & Swim Conditioning Clients: [List any past swimming experience dog may have, e.g., none, wading, likes to swim, likes to retrieve in water, etc.]