



Senior Dog Vet Visit

♥ Bring what you know. The best care starts there. ♥

Pet and Visit Information

Dog's Name:	Breed:
Age:	Weight (today):
Weight (last visit):	Date of this visit:
Owner Name:	Vet/Clinic:

Current Diet and Medications

Food (brand/type):	Amount & Frequency:
Supplements:	Current Medications:
Treats (Type/Amount):	

Changes Since Last Visit

Appetite:	Activity/Mobility:
Behavior/Mood:	Pain:
New Lumps/Bumps:	Bathroom Habits:
Sleep Patterns:	Vision/Hearing:

Items to check with Veterinarian

☐	Symptoms warranting an immediate call (safety first)
☐	Signs of pain I might be missing at home
☐	Overall quality of life assessment
☐	Medication doses vs. weight/bloodwork changes
☐	Pain management/joint support adjustments
☐	Food, supplement, and medication review
☐	Mobility/activity level changes
☐	Appetite, thirst, or bathroom habit changes
☐	Sleep pattern changes
☐	Home comfort adjustments
☐	What to expect over next 6–12 months
☐	Visit frequency/monitoring check

Additional Notes