

SENIOR CARE CHECKLIST

Circle answer

EATING:

- | | | |
|---|-----|-----|
| -Have your pet's eating habits changed? | NO | YES |
| -Has your pet had any weight fluctuation? | NO | YES |
| If yes, Please explain: _____ | | |
| -Does your pet still eat its normal food? | YES | NO |
| - If NO do you have to offer human food? | NO | YES |
| -Has your pet had any difficulty chewing? | NO | YES |
| -Has your pet been drinking more water? | NO | YES |

SLEEPING:

- | | | |
|--|----|-----|
| -Does your pet sleep more than normal? | NO | YES |
| -Does your pet sleep less than normal? | NO | YES |

MOBILITY:

- | | | |
|--|-----|-----|
| -Is there any apparent lameness in any limbs? | NO | YES |
| If yes, Please explain: _____ | | |
| -Is your pet able to exercise and play at normal levels? | YES | NO |
| -Does your pet appear to have pain getting up? | NO | YES |
| -Does your pet seem willing to take walks? | YES | NO |
| -Does your pet vocalize when getting up or walking? | NO | YES |

ENRICHMENT:

- | | | |
|---|-----|-----|
| -Does your pet seem bored? | NO | YES |
| -Does your pet have a comfortable bed and toys? | YES | NO |

BEHAVIOR:

- | | | |
|--|----|-----|
| -Does your pet wander aimlessly and/or seem disoriented? | NO | YES |
| -Does your pet seem increasingly anxious, fearful, or irritable? | NO | YES |
| -Has your pet exhibited an unusual vocalization? (Example: Yowling for no apparent reason) | NO | YES |

Any additional concerns:
