



TEXAS A&M UNIVERSITY

## Veterinary Medicine & Biomedical Sciences

### VETERINARY NUTRITION OWNER RECHECK FORM

Email forms to: [VETNUTRITION@TAMU.EDU](mailto:VETNUTRITION@TAMU.EDU)

Before your scheduled recheck appointment, the TAMU Nutrition Service must receive this **completed owner recheck form, uploaded Body Condition Score photos** and any **updated labwork and visit notes (including, but not limited to, updated body weight, body condition score, and muscle condition score)** from your veterinarian(s) since your last consultation with our service.  
*If this information is not received within 24 hours of your appointment, we reserve the right to cancel your recheck appointment.*

Today's Date: \_\_\_\_\_ Recheck Appointment Date: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Preferred email if recheck is scheduled via ZOOM: \_\_\_\_\_

Preferred phone if recheck is scheduled via PHONE: \_\_\_\_\_

I received and understand the **Frequently Asked Questions (FAQ) for recheck appointments** with the TAMU Nutrition Service: YES NO  
CLICK HERE to view a copy of the FAQ for recheck appointments.

Have you changed veterinarians or added another veterinarian to your pet's healthcare team since our last appointment: YES NO

If yes, please complete the following:

**Veterinary Clinic:** \_\_\_\_\_

**Clinic Email:** \_\_\_\_\_

**Clinic Phone:** \_\_\_\_\_

**Clinic Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

Patient Name: \_\_\_\_\_ Patient Medical Record ID: \_\_\_\_\_

My pet's most recent body weight (in lbs.) \_\_\_\_\_ Date weight was obtained: \_\_\_\_\_

Additional labwork and/or diagnostics have been performed on my pet since the last consultation with TAMU Nutrition Service: YES NO

If yes, where was this labwork and/or diagnostic(s) completed: \_\_\_\_\_

If yes, what date was the labwork and/or diagnostic(s) completed: \_\_\_\_\_

My pet has been hospitalized since the last consultation with TAMU Nutrition Services: YES NO

If yes, where and when was your pet hospitalized: \_\_\_\_\_

Who prompted this recheck appointment:

My veterinarian

I, the owner

required to maintain active client status

What are your goals for this recheck appointment:

Please follow this link: [https://tamu.qualtrics.com/jfe/form/SV\\_9NrLNlLbkf0ISua](https://tamu.qualtrics.com/jfe/form/SV_9NrLNlLbkf0ISua)

OR this QR CODE



to review and submit "How to Take Body Condition Photos of Your Pet"

This is **REQUIRED** to be completed prior to your recheck appointment.

Are you following the diet plan/recommendations from the TAMU Nutrition Service **EXACTLY** as written: YES NO

If no, what has been modified/adjusted/removed:

Is there anything **NOT** working from our prior recommendation(s):      YES (there are things NOT working)      NO (everything is working)  
If yes, what is **NOT** working or what are you having difficulty with:

CURRENT MEDICATIONS

Example: Prednisone (5mg tablets): 1 tablet twice daily

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_
- 8. \_\_\_\_\_
- 9. \_\_\_\_\_
- 10. \_\_\_\_\_
- 11. \_\_\_\_\_

Have any of these medications been adjusted since your last appointment with the TAMU Nutrition Service:      YES      NO  
If yes, what has been added/adjusted/discontinued:

CURRENT SUPPLEMENTS

Example: Nordic Naturals Omega-3 Pet Soft Gels: 2 soft gels daily  
Kan Herbs Essential Harmonizing the Stomach: 3 drops per day

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_

Have any of these supplements been adjusted since your last appointment with the TAMU Nutrition Service:      YES      NO  
If yes, what has been added/adjusted/discontinued:

Do you use anything to assist with medication or supplement administration (Example: cheese, Pill Pocket, hot dog):

Are you providing treats:      YES      NO

COMMERCIAL TREAT HISTORY (omit this section if you are NOT providing treats)

| Brand              | Flavor                                  | Size     | Number fed per day | Fed Since or Dates Fed | Reason for Stopping |
|--------------------|---|----------|--------------------|------------------------|---------------------|
| EXAMPLE: Milk-Bone | Soft & Chewy Beef & Filet Mignon Recipe | One size | 4                  | December 2023          | Still feeding       |
|                    |   |          |                    |                        |                     |
|                    |   |          |                    |                        |                     |
|                    |   |          |                    |                        |                     |
|                    |   |          |                    |                        |                     |

HUMAN FOOD / HOMEMADE TREAT HISTORY

(this section includes anything you might add on top of the diet or as enticement for your pet)

| Ingredient                   | Serving Size | Times Fed Per Day | Fed Since or Dates Fed | Reason for Stopping          |
|------------------------------|--------------|-------------------|------------------------|------------------------------|
| EXAMPLE: Sweet potato, baked | ¼ cup        | 1                 | August 2024            | Did not like mixed with food |
|                              |              |                   |                        |                              |
|                              |              |                   |                        |                              |
|                              |              |                   |                        |                              |
|                              |              |                   |                        |                              |
|                              |              |                   |                        |                              |

QUALITY OF LIFE SCALE

How do you evaluate the general quality of life of your pet

VERY POOR

12345

VERY GOOD

How do you evaluate the health state of your pet

SEVERELY ILL

12345

DOES NOT SEEM ILL

How do you evaluate the level of activity of your pet

(Example: motivation, curiosity, display of normal behavior) APATETIC/LETHARGIC

12345

ACTIVE

How do you evaluate the interaction of your pet with you or your family

DETERIORATED

12345

VERY GOOD

Has your pet had diarrhea since your last consultation with the TAMU Nutrition Service

(unformed or loose stools, usually occurring in larger amounts and/or more often than usual): YES NO

If yes, how many times per day:

If yes, how soon after eating does your pet need to pass a bowel movement:

If yes, how long (days to months) has your pet had diarrhea?

Have you modified anything that made the diarrhea improve (example, fiber, metronidazole, behavior modification): YES NO

If yes, what have you modified:

Have you modified anything that made the diarrhea worsen (example, fiber, metronidazole, behavior modification): YES NO

If yes, what have you modified:

What score would you give for your pet's most recent bowel movement (PC: Purina ProPlan Veterinary Diets):

☐

1



- Very hard and dry
- Often expelled as individual pellets
- Requires much effort to expel from body
- Leaves no residue on ground when picked up

☐

2



- Firm, but not hard, pliable
- Segmented in appearance
- Little or no residue on ground when picked up

☐

3



- Log shaped, moist surface
- Little or no visible segmentation
- Leaves residue on ground, but holds form when picked up

☐

4



- Very moist and soggy
- Log shaped
- Leaves residue on ground and loses form when picked up

☐

5



- Very moist but has a distinct shape
- Present in piles rather than logs
- Leaves residue on ground and loses form when picked up

☐

6



- Has texture, but no defined shape
- Present as piles or spots
- Leaves residue on ground when picked up

☐

7



- Watery
- No texture
- Present in flat puddles

Are you concerned about your pet's appetite:      YES      NO

Have there been any changes in your pet's appetite since your last consult with the TAMU Veterinary Nutrition Service:      YES      NO

If yes, please explain:

If you are having difficulty getting your pet to eat, what have you tried to entice them (Example: warming food, mixing in canned, adding human foods):

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If you would like to provide any additional attachments to support your recheck appointment with our nutrition service, please email them with this recheck form to [vetnutrition@tamu.edu](mailto:vetnutrition@tamu.edu) (Example: food diary or body weight logs).

Please include the following in your email:

Subject line: Updated Medical Records for (Pet Name – First and Last)

Text: Please provide the date of your pets recheck appointment