

Rabbit History Form**Date:** _____

Name of Rabbit: _____

Age: _____

Sex: _____

Pet Animal/Breeder

Breed: _____

Background Information:

Length of time owned: _____ Where acquired? Breeder Pet Store Other _____

How often is animal handled? DailyOccasionallyNever

Character of feces? _____

Husbandry:

Housed Indoors/Outdoors? _____ Is rabbit allowed to roam free in the house? Yes No

Where is cage located? _____

Type of cage: _____ Galvanized? Yes No

Size of cage: _____

Cage substrate? _____ Frequency of cage cleaning? _____

Type of disinfectant used to clean cage? _____

Nutrition:Type of Food offered:--Pellets? Yes No If yes, what brand? _____ Amount fed/frequency: _____

--Hay? Yes No If yes, what type? _____ Amount fed/frequency: _____

--Supplements offered and frequency? (i.e. fresh grass, carrots, lettuce, etc...) _____

Water Source? _____ How often is water changed? _____

Any other pets? No Yes If yes, specify _____ Do other pets interact with rabbit? No Yes

Any other rabbits? No Yes If yes, specify _____

Are rabbits housed together or singly? _____

If not housed together, where are other rabbits located? _____

Any new additions to the rabbit population? No Yes If yes, specify _____

Past Medical History/Problems:

Current Presenting Problem:

Duration of Complaint: