livewell animal hospital of Reston

Fear Free / Low-Stress Handling Pre-Visit Questionnaire

As Fear Free and Low-Stress Handling Certified Professionals, we want to make your pet's veterinary experience as enjoyable and low-stress as possible. As such, it's important for us to understand what your pet might find upsetting. This information will help us to adjust our care to better serve and comfort your pet.

Please answer the following questions to the best of your knowledge so we can take into consideration both your and your pet's preferences.

** Indicates a required question.*

1. First and Last Name *

2. Email Address *

3. Pet's Name *

4. Does your pet show any reluctance to getting in the carrier or car? *

Mark only one.

- Yes
- No

5. How would you describe your pet's behavior during travel? *

Mark only one.

- Eager & excited
- Subdued
- More quiet than usual
- More vocal than usual
- Other:

6. **Does your pet do any of the following during travel?** *

Check all that apply.

- [ ] Pant
- [ ] Tremble
- [ ] Pace
- [ ] Hide
- [ ] Drool
- [ ] Vomit
- [ ] Vocalize
- [ ] Poop
- [ ] Pee

7. **Are there any situations that your pet has tried to avoid or seemed to dislike in the past?** *

Check all that apply.

- [ ] Entering the vet hospital
- [ ] Unfamiliar people or animals
- [ ] Getting onto the scale
- [ ] Going into the exam room
- [ ] Being put up on the exam table
- [ ] Having a rectal temperature taken
- [ ] Ear exam and/or cleaning
- [ ] Nail trim
- [ ] Being picked up or carried
- [ ] Being removed from a carrier
- [ ] Placement of the stethoscope on the chest
- [ ] Other:

8. **Has your pet ever been given any supplements or prescribed any medications to help manage his/her fear or anxiety associated with the visit? If so, what was it and what sort of results did you experience?** *