



## Senior Health Checklist

**Pet's name:** \_\_\_\_\_

**Owner's name:** \_\_\_\_\_

	No	Mild	Moderate	Severe	When did the problem begin?
Weight gain or loss					
Appetite increase or decrease					
Vomiting or diarrhea					
Increased drinking or urination					
Coughing, weakness after exercise, or increased panting					
Lumps or tumors, skin problems					
Bad breath, sore gums, or difficulty chewing					
Decreased awareness or gets confuse or lost					
Marking or spraying, bowel movements, or incontinence in the house					
Forgets previously known commands					
Decreased affection of interaction with owners					
Increased irritability or aggression - Decreased tolerance of handling					
Increased fear or anxiety					
Decreased hearing or selective hearing					
Decreased tolerance of being left alone					
Repetitive or compulsive behaviors: Pacing__ Circling__ Over-grooming__ Licking non-food items__ Other__					
Decreased grooming or self care					
Uncoordinated or weak					
Muscle tremors or shaking					
Decreased activity or sleeping more					
Difficulty climbing stairs or increased stiffness					
Limping, lagging behind, or appearing stiff after exercise					
Reluctant to climb stairs or jump up					
Slow to rise from resting position					
Waking owners at night					

