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services

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10737 Venice Blvd.  
Los Angeles, CA 90034  
(310) 559-3770

## Center-Sinai Animal Hospital TimeSaver Form DROP-OFF FORM FOR PHYSICAL EXAM

Print, fill out and fax to us at 310.559.3770, or bring with you when you drop off your pet

Dr. Baum  Dr. Spira  Dr. Amanda Williams  Dr. Marissa Williams

Date  Pet's Name

Client Name

\*\*Number at which you can be reached today

Is this a new phone number that we should keep on file? Yes  No

Has there been an address change? Yes  No

If yes, please write in your new address below:

Street address City State Zip Code

### THE MAJOR REASON FOR TODAY'S VISIT

How long has your pet had this problem?

Progression of problem: Getting worse  No change

Are there other health problems that we should be aware of, or concerns that you would like us to address today? If so, please explain.

PLEASE PUT AN "X" IN THE BOX FOR EACH ITEM AS APPROPRIATE:

Appetite: Decreased  Normal  Excessive   
Water intake: Decreased  Normal  Excessive   
Vomiting: Yes  No  How often

Bowel Movements: Decreased  Normal  Increased

Straining  Diarrhea  Blood

Urination: Decreased  Normal  Increased

Straining  Diarrhea  Blood

Attitude: Normal  Depressed  Less Active

Current Medications:

Do the medications help the problem?

Lastly, is your pet: A Fear Biter  Aggressive  Hard To Handle

***If your pet is potentially aggressive, PLEASE TELL OUR STAFF!***

We always try to make friends with our patients and treat them in a caring and humane way. However, in the event that your pet won't let us care for him or her, we ask your permission to sedate.

I give permission to Center Sinai to sedate my pet. Yes  No

Signature

Home: [www.CenterSinaiAnimalHospital.com](http://www.CenterSinaiAnimalHospital.com)  
Tel: 310-559-3770 Fax: 310-559-9447