

# Reptile and Amphibian History Form

Pet Name: \_\_\_\_\_ Pet Owner: \_\_\_\_\_  
Date: \_\_\_\_\_ Pet ID No. \_\_\_\_\_

## Pet Details

Common Species Name: \_\_\_\_\_ Scientific Species Name: \_\_\_\_\_  
DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Neutered? \_\_\_\_\_  
Breeding Origin: \_\_\_\_\_ Date Acquired: \_\_\_\_\_  
Acquired from: \_\_\_\_\_  
Reproductive History: \_\_\_\_\_  
Date Last Shed: \_\_\_\_\_ Shedding Frequency: \_\_\_\_\_  
Other Reptiles/Amphibians in the House: \_\_\_\_\_  
Other Pets: \_\_\_\_\_

## Cage

Cage Type: \_\_\_\_\_ Cage Size: \_\_\_\_\_  
Cage Materials: \_\_\_\_\_  
Decorations: \_\_\_\_\_  
Ventilations: \_\_\_\_\_  
Heating Equipment: \_\_\_\_\_ Thermostat Setting: \_\_\_\_\_  
Highest Temperature: \_\_\_\_\_ Lowest Temperature: \_\_\_\_\_  
Highest Humidity Level: \_\_\_\_\_ Lowest Humidity Level \_\_\_\_\_  
Light Type: \_\_\_\_\_ Last Changed: \_\_\_\_\_  
Bathing Equipment: \_\_\_\_\_  
Cleaning Agents Used: \_\_\_\_\_ Cleaning Frequency: \_\_\_\_\_  
Other: \_\_\_\_\_

## Diet

Food Type: \_\_\_\_\_ Fresh/Frozen/Live: \_\_\_\_\_  
Amount per Feeding: \_\_\_\_\_ Frequency: \_\_\_\_\_  
Water Supply Type: \_\_\_\_\_ Water Dispenser: \_\_\_\_\_  
How often water is changed: \_\_\_\_\_ Supplements: \_\_\_\_\_  
Other: \_\_\_\_\_

## Medical History

Primary Complaint: \_\_\_\_\_ Duration: \_\_\_\_\_  
Previous Health Problems: \_\_\_\_\_  
Current Medications: \_\_\_\_\_  
Previous Medications: \_\_\_\_\_