REPTILE CARE QUESTIONNAIRE

Diet and environment are critical factors in a reptile's health. To help the doctor properly treat your pet, please provide the following information in as much detail as possible.

Your pet's name	Species			
How long have you owned your pet?		How old is you	r pet?	
What is your pet's housing? Please check	all that apply:	1) Roams in the ho	use	
2) Confined in cage with solid sides o	or screen sides _	3) Confined in o	cage with solid top	or screen/mesh
top (or open top) 4) Housed indoors	% 5)	Housed outdoors	%	
Approx. cage dimensions: Length	V	/idth	Height	
What bedding is used in the cage?				
How is water provided?			<u>-</u>	
What is your pet's lighting? Check all tha	t apply: 1) Re	ptile fluorescent tub	e (UV-B):	
18 inches long 24 inches 48 inc	ches Comp	act UV coil 2) I	ncandescent (screw t	ype) bulb
3) Mercury vapor bulb 4) Room li	ighting only	5) Other (please d	escribe)	
Brand(s) of lights used?		How old are	the lights?	
How far is the light from your pet?		Is there glass or pla	stic between the light	
and the pet? Does your p	et hide in a dar	k place during the d	ay?	
How long is light provided daily (day lengt	ch)?			
What heat sources are used for your pet?	Heating pad _	Hot rock	Bright heat lamp	_
Dark heat lamp (purple, red or cera	mic coated)	Other		
What is the air temperature in your pet's l	nabitat?	_ How do you mea	asure the cage temper	rature?
Mercury thermometer Dial therm	mometer (rotat	ing hand) Colo	r strip thermometer	
Digital thermometer Infrared gu	n None _	_		
What is the usual temperature in the room	the cage is kep	t in?		
What do you feed your pet? Please list <u>all</u>	food items, incl	uding treats:		
If insects are used as food, are they fed any	supplements f	erst? If so, what is fe	d?	
Do you use any vitamin or mineral suppler used:				nuch is
List any animals your pet has contact with	:			