

# quality of life **worksheet**

This tool is designed to help veterinarians and clients evaluate a pet's condition with objective measures to create a baseline for your pet's health care needs. This can help highlight areas your veterinarian can provide assistance in managing your pet's care and symptoms. This will create a baseline for your pet's health care needs. It is best to rate your pet's status consistently and compare it to the prior week's score.



## **A**ppetite



## **B**reathing



## **C**are Required



## **D**emeanor & **E**nergy



## **F**amily

Not eating/ drinking	<b>1</b>	Extreme effort to breathe, discolored/blue gums, distress	<b>1</b>	Constant care for cleanliness, feeding	<b>1</b>	Actively crying out in pain/minimally responsive/ comatose	<b>1</b>	Emotionally overwhelmed by care of pet, every day is a struggle, affecting family relationships and daily life negatively	<b>1</b>
Eating occasionally (treats) < 1 meal per 48 hours	<b>2</b>	Consistently labored or severe episodes	<b>2</b>	Increased care	<b>2</b>	Quiet and desires minimal interaction	<b>2</b>	Stress present, times of extreme emotions and struggle, starting to affect daily life	<b>2</b>
Reduced appetite	<b>3</b>	Increased rate or intermittent episodes of rapid breath/wheezing/ coughing	<b>3</b>	Senior pet care	<b>3</b>	Quiet but enjoys interaction	<b>3</b>	Minor changes to daily life, actively coping, no concerns on continuing at this level of care	<b>3</b>
Eating normally	<b>4</b>	Breathing consistent for pet's normal behavior	<b>4</b>	No additional care the pet's past year	<b>4</b>	Interacts, responds to voice, brightens with attention	<b>4</b>	Minimal changes, no daily stress or concerns	<b>4</b>

## veterinary visit **worksheet**

### **Pet concerns notes:**

Areas of Concern that need to be discussed with Vet: \_\_\_\_\_

What improvements have been seen? \_\_\_\_\_

What symptoms have not been addressed? \_\_\_\_\_

### **Veterinarians notes: needs**

Current Medications: \_\_\_\_\_

Current Diagnosis: \_\_\_\_\_

Next Medical Appointment: \_\_\_\_\_

Goals for care: \_\_\_\_\_

**CHARTING:**

This should be used to evaluate progression of symptoms and care required for pet. Record a rating for each category. You can choose to do it daily or only on specific days of the week. There is not a good score or a bad score. It is important to plan and be consistent on the rating schedule/criteria. You should compare the ratings week to week, to create an objective measure of your pet's condition. Bring this worksheet to pet's medical visits to provide information to your medical team on your pet's at home condition.

Week 1	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Week Score	Change/Comments
A									
B									
C									
D/E									
F									
Daily Total									

Week 2	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Week Score	Change/Comments
A									
B									
C									
D/E									
F									
Daily Total									

Change in Score from Week 1 to Week 2 : \_\_\_\_\_