

*Please answer the following questions so we are able to suit your individual needs – which do you feel most applies to you?

CHECK ONE:

- I feel that my pet is another member of our family. _____
- ◆ I feel that my pet is just a pet. _____

CHECK ONE:

- ♣ I want the best medical care available for my pet; please recommend anything that you feel is necessary for good health. _____
- ☺ I want good medical care for my pet, but there is a limit to what I'm able to have done. _____
- ◇ I want you to perform only the services that I request. _____

CHECK ONE:

- ♠ I want to learn as much as I can about pet health care, please explain in detail what has been done for my pet or what is needed. _____
- ◆ I would prefer you just summarize what has been done for my pet or what is needed. _____
- ☹ I want my pet healthy, but don't need to know what has been done. _____

RESPONSIBILITY QUESTIONS

- ☀ Family member most responsible for care of pet. _____
- ♥ In case of a major medical problem, who makes the ultimate decision regarding treatment? _____

