



Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**YOUR DETAILS**

Title: \_\_\_\_\_ Surname: \_\_\_\_\_ First Name: \_\_\_\_\_

Personal Pronouns (optional) \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: (M) \_\_\_\_\_ Phone (other): \_\_\_\_\_

Email: \_\_\_\_\_

**YOUR FISH'S DETAILS**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Years or Months (circle)

Breed: \_\_\_\_\_

Colour: \_\_\_\_\_

Have they been on medications over the last 6 weeks? If so, provide details:

\_\_\_\_\_

Previous health checks? YES or NO (circle)

To enable us to contact your previous vet, please provide the practice's name:

\_\_\_\_\_

**GENERAL QUESTIONS**

Do you have any other exotics, reptiles and/or birds at home: YES or NO (circle)

If yes, please give details:

\_\_\_\_\_

How did you hear about us (circle):

Vet (which one) \_\_\_\_\_  Internet \_\_\_\_\_

Pet Shop (which one) \_\_\_\_\_  Other (e.g. friend) \_\_\_\_\_

Passing By

I give permission for a case history to be sent my referring vet? Yes  No

I give permission for my animal's photo to be used on Social Media? Yes  No



Dr Alex Rosenwax  
 BVSc MACVSc(Avian Health)  
 Bird Consultant  
[www.birdexoticsvet.com.au](http://www.birdexoticsvet.com.au)

Welcome.

To ensure we take all fish details correctly, please take a few minutes to fill out this form.

Your name \_\_\_\_\_

Date \_\_\_\_\_

**POND**

Dimensions	
Where does water come from?	
How often is water changed?	
Type of pump used? How long in use?	
Type of filter used? How long in use?	
Type of Heating?	
Temp of pond?	
Water quality - nitrite, nitrate, ammonium, Ph	

**FISH**

Species	
Number of fish	
Quarantine?	
What food is fed? How is it stored?	
Medications used?	
No of fish affected?	
Frequency of deaths?	
Signs prior to death?	

If additional space is required please use the other side of this form.

Thank you.