

Avian History Form		Date:	
Name of Bird: _____		Age: _____	Sex: _____
Species: _____			

Background Information:

Length of time owned: _____ Where acquired? Breeder Pet Store Other _____

Vaccination history: _____ When was last molt? _____ Character of feces: _____

How often is bird handled? Daily Occasionally Never Is bird ever taken outside? Yes No

Husbandry:

Housed Indoors/Outdoors? _____ Where is cage located? _____

Type of cage: _____ Galvanized? Yes No

Size of cage: _____

Cage substrate? _____ Frequency of cage cleaning? _____

Type of disinfectant used to clean cage? _____

Types of toys/perches offered? _____

Nutrition:

Type of Food offered:

--Pellets? Yes No If yes, what brand? _____ Amount fed/frequency: _____

--Seed? Yes No If yes, what type? _____ Amount fed/frequency: _____

--Fruits? Yes No If yes, what types? _____ Amount fed/frequency: _____

--Vegetables? Yes No If yes, what types? _____ Amount fed/frequency: _____

--Supplements/Treats offered and frequency? _____

Water Source? _____ How often is water changed? _____

Any other birds? No Yes If yes, specify _____

Any other pets? Yes No If yes, specify _____

Are birds housed together or singly? _____

If not housed together, where are the other birds located? _____

Any new additions to the bird population? No Yes If yes, specify _____

--Were the new additions properly quarantined separate from rest of bird population? _____

Past Medical History/Problems:

Current Presenting Problem:

Duration of Complaint: