



NEW PATIENT FORM

Welcome to Muse!

Please review the new patient questionnaire below, and email your completed form to museholisticvet@gmail.com. Once we receive the completed form, we will email you back within 1-2 business days to schedule an appointment.

We truly appreciate you taking the time to fill this out this detailed form— it helps us get to know your family and give the best care possible. Share as much or as little as you'd like, but **please don't skip the questions marked with ***. Every detail you share helps us better support your animal's health and happiness.

Please note: All communication with Muse is conducted by email. This allows us to keep everything organized for your pet's care.

Client Information

Client's First and Last Name *

First Name

Last Name

Address *

Street Address

City

State

Zip Code

Phone Number *

Email Address *

Spouse or Partner's Full Name, Phone Number, & Email (if relevant)

How did you hear about Dr. Barrett and Muse Holistic Veterinary Care? Is there someone we can thank for referring you?



Pet Information

Pet's Name *

Age and/or DOB if known *

Weight in lbs *

Species *

Canine

Feline

Equine

Other:

Sex *

Female

Male

Spayed/Neutered? *

Yes

No

Breed *

Color *

Please list your current primary veterinary clinic, any specialists, and any past veterinary clinics. If you have their contact information, include it so we can request medical records on your behalf. However, if you already have copies of your pet's records, you're welcome to email them to us. *



Presenting Concerns

What is the reason for your upcoming appointment? Does your animal have any current medical or behavioral problems? *

Why did you decide to seek holistic/integrative care for your animal? What are the goals you hope to attain by working with Dr. Barrett and Muse Holistic Veterinary Care? *



History

Animal's approximate age when they joined your family? *

Approximate age when they were spayed/neutered, if known?

Where did you acquire your animal (ie: breeder, pet store, rescue, shelter, stray)? *

Why did you choose this individual animal?

**What other animals are in the household? Do they get along?
How are their social dynamics and interactions?**



Medical

Besides any current issues, describe any past medical issues your pet has experienced: *

Do you give heartworm preventatives (if so, what kind and how often)? *

Do you give flea/tick preventatives (if so, what kind and how often)? *

Does your pet take any current medications? If yes, list dosage, frequency and duration: *



Medical

Does your pet take any supplements? If yes, list specific products, dosage, frequency and duration: *

Please list a summary of the vaccines that your pet has had in their life (types and frequency):

Diet

What type of food or brand of food does your pet eat: *

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How many meals per day does your pet eat? How much is fed at each meal? *

How long have you been feeding this diet? *

Would you be willing to cook food for your pet?

What kind of treats does your animal eat (please be specific): *

Any known dietary sensitivities? *

Is water available at all times, how often is it changed, what kind of water (filtered, tap, bottled)?

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How often do you wash the food and water bowls?

Does your pet have any unusual cravings (ie. Grass, dirt, rocks, feces, plastic, metal)? *

Behavior

How would you describe your pet's personality? *

Have you done any training with your animal? If so, please describe:

Is your animal reactive? If so, in what situations?

Does your animal have any anxieties? (separation, loud noises, etc.)*

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If so, what do you use to manage their anxiety? Do you feel like those methods work? *

Does your animal seem to like music, or seems calmed by certain sounds? If so, what type or genre?

How does your animal react in new situations? With new people? *

Has there been any trauma in the animal's life?

How is your animal sleeping? (ie. do they sleep at night vs. the day, do they sleep deeply vs. restless and waking often) *

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Do they have an obvious temperature preference – typically seeking warmth or cool? *

Grooming

Is your animal professionally groomed? If yes, how often and where?

How often is your animal bathed at home? What shampoo or conditioners are used? *

What other skin care or ear cleaner products are used? *

On a scale of 0 to 10, how itchy does your animal seem? (0 = no itch, 10 = constant itching) *

What symptoms of itchiness do you notice, if any? *



Exercise

How does your animal get exercise (ie. yard access, leashed walks, dog park, training, beach, sports, etc.)? *

How often and how long? *

Are you interested in learning fitness exercises for your animal?*

Describe a typical daily activity schedule for your animal:

What type of flooring is in your home (ie. hardwood, carpet, tile)? *

Does your home have any stairs? *



Environment

What types of cleaners and detergents do you use in your home for dishes, laundry, surfaces, and floors? *

What type of products do you use in your lawn and garden? *

What do you use for pest control? *

Do you use air fresheners in your home, candles, or incense? *

Do you use an air purifier?

Does anyone smoke or vape inside the house? *



Do you have an air conditioner or leave windows open?

Do you think your home may be moldy or dusty? *

Family/Household

Have there been any major changes in the animal's household (moving homes, new person, new pet, loss of other pet or human)? *

How would you describe the household environment for your animal (ie. calm, chaotic, lonely, crowded)? *

Please list all the people and animals currently living in the household: *

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Does anyone in the household receive holistic medical treatment (ie. acupuncture, chiropractic, massage, supplements, naturopathy, osteopathy), if yes please describe:

What profession do you work in? *

How about other family members?

Treatment Consent *

I authorize Dr. Meghan Barrett and Muse Holistic Veterinary Care to examine and treat my animals. I understand that Muse specializes in holistic medicine and rehabilitation, and that they do not offer emergency care, same-day diagnostics, imaging, or surgery. I understand that I must maintain a relationship with a primary care veterinarian to take care of urgent issues, diagnostics and surgery that Muse cannot perform.

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Newsletter Consent *

I agree to receive a periodic email newsletter from Dr. Meghan Barrett and Muse Holistic Veterinary Care. I understand I can opt out at any time.

Media Consent *

I give Dr. Meghan Barrett permission to take photos and/or videos of my animal to share on Muse's social media and website. I understand that my animal's name and my name will not be shared publicly.

If you'd ever prefer we not take or share media of your pet, just let us know — we're always happy to honor your wishes.