



## VCA Aurora Animal Hospital



*Working as a team to improve the quality of life for your pet and your family.*

### **Internal Medicine**

Terry Medinger, DVM, MS  
Diplomate, ACVIM  
Medical Director

Kelly Cairns, DVM, MS  
Diplomate, ACVIM

### **Cardiology**

Jeremy Orr, DVM  
Diplomate, ACVIM (Cardiology)

### **Dermatology**

Jennifer Matousek, DVM, MS  
Diplomate, ACVD

Lindsay McKay, DVM, MS  
Diplomate, ACVD

### **Neurology**

Miyu Mercier, DVM  
Practice Limited to Neurology

Abbie Lebowitz, DVM  
Diplomate, ACVIM (Neurology)

### **Ophthalmology**

Robert Swinger, DVM  
Diplomate, ACVO

### **Oncology/Hematology**

Shawna Greene, DVM, MS  
Diplomate, ACVIM (Oncology)

### **Radiation Oncology**

Jayne Looper, DVM  
Diplomate, ACVR-RO

### **Radiology**

Matthew Bischoff, DVM, MS  
Diplomate, ACVR

Donna Almondia, VMD  
Practice Limited to Radiology

### **Surgery**

Steven Abel, DVM  
Diplomate, ACVS

John Peacock, DVM  
Diplomate, ACVS

### **Critical Care**

Sheila McCullough, DVM, MS  
Diplomate, ACVIM, ACVECC

Caroline Tonozzi, DVM  
Diplomate, ACVECC

Dear New Client:

Welcome and thank you for choosing VCA Aurora Animal Hospital. We are committed to providing you and your pet with the best possible care. In order for us to do that, we ask that you have referral information from your primary care veterinarian faxed to us at (630) 301-6137 at least 24 hours before your first visit. In addition, please complete the form (found on our website) regarding your pet's current skin problems and bring it with you to the initial visit. This information will aid us in focusing on the progression of the disease process over time and in providing details about past treatments and their results.

Please remember the following things:

- Do not bathe your pet for 7 days prior to the visit or clean your pet's ears /apply medications for 1 day prior to the visit.
- Follow your primary care veterinarian's recommendations regarding other medications your pet is receiving.
- In case blood work may need to be done, please do not feed your pet after midnight the night before your appointment (unless your pet has diabetes). Water may be offered up until the time of the appointment.

Factors such as cost of the visits, treatments, and time spent on appointments can be a surprise to someone who is not familiar with a veterinary dermatologist. You should plan on spending up to 1.5 hours at the clinic with your pet on your first appointment. This visit is usually the longest and subsequent visits are usually 30-60 minutes unless special testing is being done.

Generally speaking, the cost of the initial visit averages \$200- 275 without medications. This estimate includes the initial consultation and examination fee and basic skin/ear cytologies and scrapings that examine for microorganisms and parasites. It is difficult to predict cost of medications dispensed as this varies with the diagnosis and the size of the pet. Skin testing and more involved diagnostic tests that include specific testing for thyroid disease, adrenal disease and/or biopsies are additional. Repeat visits are often necessary in order to complete the work-up. However, repeat examinations and diagnostics often average \$120, plus the cost of medications.

Should you need to cancel or reschedule an appointment, we ask that you let us know at least 48 hours in advance in order for us to fill the appointment with pets from our waiting list. Please do not hesitate to call the office if you have any questions regarding your appointment. We look forward to meeting you and your pet!

Sincerely,

Lindsay McKay, DVM, Diplomate, ACVD

Jennifer Matousek, DVM, MS, DACVD



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## DERMATOLOGIC HISTORY FORM

Owner's Name \_\_\_\_\_ Pet's Name \_\_\_\_\_

1. Does your pet have any allergies/adverse reactions to medications? \_\_\_\_\_

If yes, please describe \_\_\_\_\_

\_\_\_\_\_

2. How old was your pet when obtained? \_\_\_\_\_ How old is pet now? \_\_\_\_\_

3. Where did you obtain your pet? \_\_\_\_\_

4. Has your pet been spayed or neutered? \_\_\_\_\_ If yes, when? \_\_\_\_\_

5. How old was your pet when its skin and/or ear problems began? \_\_\_\_\_

6. What did the problem look like when it started? When did it first start? What part of the body was first affected? Did it move to other areas?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Was the onset sudden or gradual? \_\_\_\_\_

8. Is the problem year round? \_\_\_\_\_

If no, what season does the problem seem the worst? \_\_\_\_\_

9. Grade your pet's itchiness from 1 to 10: 1= not itchy, 10= itchy all day and night \_\_\_\_\_

10. What came first- your pet's skin lesions or did you notice itchiness? \_\_\_\_\_

11. Does your pet have any ear disease? \_\_\_\_\_

12. Is your pet on flea preventative? \_\_\_\_\_ Which preventative? \_\_\_\_\_

13. Is your pet on heartworm preventative? \_\_\_\_\_ What type is it? \_\_\_\_\_

Is it flavored or chewable? \_\_\_\_\_

13. What other medications is your pet **currently** taking? Include oral pills, ear, eye, herbal, vitamin, shampoo, and spray therapies.

Please describe including name, dose, and duration \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Which of these medications have helped? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

15. What other medications has your pet received *in the past* for skin/ear problems?  
Which of these helped?

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16. What other pets are in the household? \_\_\_\_\_

17. Are they affected by the skin/ear problem? \_\_\_\_\_  
If yes, describe how \_\_\_\_\_

18. Do any people in the home have any rashes, skin lesions, or itching? \_\_\_\_\_  
If yes, please describe \_\_\_\_\_

19. How often does your pet receive a bath? \_\_\_\_\_

20. Date last bath was given \_\_\_\_\_

21. What bathing products were used? \_\_\_\_\_

22. Does your pet have any other medical problems? Please describe \_\_\_\_\_

23. What percent of time does your pet spend indoors? \_\_\_\_\_ outdoors? \_\_\_\_\_

24. Describe your pet's outdoor environment \_\_\_\_\_

25. Describe your pet's indoor environment \_\_\_\_\_

26. Has your pet ever been out of the state? \_\_\_\_\_  
If yes, where? \_\_\_\_\_

27. Describe your pet's diet. Include brand, dry or canned, and duration fed.

• Pet food \_\_\_\_\_

• Treats \_\_\_\_\_

• Supplements \_\_\_\_\_

• Table foods \_\_\_\_\_

• Other \_\_\_\_\_

28. Have there been any changes in your pet's diet? \_\_\_\_\_

If yes, was the skin/ear problem affected by the change? \_\_\_\_\_

If yes, please describe \_\_\_\_\_

29. Please list any other information that you think may be helpful \_\_\_\_\_

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