

## Owner Homemade Diet Questionnaire

In order for Dr. Bullen to proceed with the recipe formulation, please provide the following information via fax or email:

Your /Clients Name: \_\_\_\_\_

Pet's Name: \_\_\_\_\_

Pet's Primary Care Doctor: \_\_\_\_\_ Hospital Name: \_\_\_\_\_

DIETARY HISTORY: To the best of your ability, please list all commercial (prescription and over-the-counter) diets fed to your pet. Please see the example before proceeding below.

Brand	Specific Name (Species, flavor, etc.)	Meals per day	Amount per meal (8 oz. cups vs. #oz. can)	Form (dry, canned, stew)	Current or past?
Ex: Royal Canin	<i>Feline, Renal Support A</i>	3	.25, 8 oz. cups	dry	current
Ex: Hill's	<i>Canine, i/d low fat</i>	2	¾, 13 oz. can	stew	past

Please list all human food(s) your pet has eaten in the past:

Protein: (example: chicken liver, ground beef, etc.) \_\_\_\_\_

Carbohydrates: (example: sweet potato, brown rice, etc.) \_\_\_\_\_

Please list any foods you pet WILL NOT consume: \_\_\_\_\_

Please provide any additional information you would like Dr. Bullen to know about your pet's eating habits or your diet philosophy: \_\_\_\_\_

## Owner Homemade Diet Questionnaire

**TREAT HISTORY:** To the best of your ability, please list all commercial OR human-food treats fed to your pet. Please see the example before proceeding below.

Brand	Specific Name (Species, flavor, etc.)	Amount per day	Size	Current or past?
Ex: Milk Bone	Canine, Original Flavor	2	Large	current
Ex: NA	Chicken breast, boiled	1, 8 oz. cup	NA	current

**Current Medications:** To the best of your ability, please list all medications (prescription and over-the-counter) given to your pet. Please see the example before proceeding below.

Brand	Flavor, Name (if applicable)	Active ingredient	Concentration per capsule	Amount per day	Current or past?
Ex: Prilosec	NA	Omeprazole	20 mg	1	current

**Current Supplements:** To the best of your ability, please list all supplements (prescription and over-the-counter) given to your pet. Please see the example before proceeding below.

Brand	Flavor, Name (if applicable)	Active ingredient	Concentration per capsule	Amount per day	Current or past?
Ex: Nature's Bounty	Triple Strength Fish Oil (no flavor)	Omega-3 Fatty Acids (EPA +DHA)	1400mg Fish Oil (980mg EPA + DHA)	2	current

## Owner Homemade Diet Questionnaire

*Please select up to 6 protein sources (2 main sources will be chosen for your pet's homemade diet recipes).*

Ingredient	Please use	Please DO NOT use	Comments
Chicken breast			
Duck			
Turkey breast			
Ground beef, 93-95% lean			
Liver (specify animal)			
Pork, loin			
Lamb			
Rabbit			
Venison			
Boar			
Elk			
Bison			
Pheasant			
Ostrich			
Kangaroo			
Goat			
Alligator			
Quail			
Fish (Salmon)			
Fish (Tilapia)			
Fish (Cod)			
Calamari			
Scallops			
Egg white			
Egg, whole			

*Please select up to 6 carbohydrate sources (2 main sources will be chosen for your pet's homemade diet recipes).*

Ingredient	Please use	Please DO NOT use	Comments
White Rice			
Brown Rice			
Wild Rice			
Barley			
Oat meal/ Oat bran			
Pasta (enriched macaroni)			
White Potato			
Sweet Potato			

## Owner Homemade Diet Questionnaire

Please select up to 10 fruit/vegetable sources (up to 4 will be chosen per each of your pet's homemade diet recipes).

Ingredient	Please use	Please DO NOT use	Comments
Green beans			
Carrots			
Corn			
Spinach			
Red Cabbage			
Shiitake mushrooms			
Broccoli			
Cauliflower			
Zucchini			
Yellow Squash			
Pumpkin, canned			
Sweet bell peppers			
Green peas			
Tomatoes			
Pinto Beans			
Apples			
Bananas			
Cantaloupe			
Watermelon			
Chickpeas/ Garbanzo beans			

Please feel free to send image attachments for the food, treats, and/or supplements. If more room is needed, please feel free to write on a separate piece of paper. Additional information is always welcome!

Once we have this information, we can begin our consultation for your pet. PLEASE LET US KNOW EITHER WAY IF YOU WOULD LIKE TO PROCEED. Should you have any questions or concerns, please do not hesitate to contact us. We are very much looking forward to working with you!

**I, (the client) understand that:**

- The personalized recipes provided by Dr. Bullen are formulated using a) the information provided above and b) all available/ provided medical records.
- Each recipe will likely include an oil selected by Dr. Bullen (as a source of essential fatty acids).
- Each recipe will include a vitamin/ mineral supplement.
- Additional supplements *may* be recommended based on my pet's disease state(s).
- There is no guarantee that my pet will eat the provided recipes.
- I agree to, and understand, the previously discussed turnaround time (if applicable).
- I will contact Dr. Bullen in a timely manner if there is any question or concern that my pet is not tolerating the diet changes.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date of Signature