

# PETFAX Avian Behavior Fax Sheet

The owner(s) should fill out the following form thoroughly yet concisely. **PLEASE ANSWER EACH QUESTION DIRECTLY ON THIS FORM IN THE SPACE PROVIDED. LIMIT ADDITIONAL INFORMATION TO ONE TYPEWRITTEN PAGE IF NECESSARY.** Print out and fax both the completed Behavior Fax Sheet and **Initial Consultation Request Form** to 1-508-839-8734. If you have questions, call 1-508-887-4640.

Date:	Recorder:	
Name & Address of owner:		
Telephone:	Fax:	
Name of bird:	Breed:	
Age of bird now:	Age at which bird was acquired:	
Weight:            Color:	Sex:	
Origin of bird:		
Wild caught:	Captive bred:	Hand raised:
Date of last physical examination: (Please include copies of any relevant medical records and/or blood work.)		
Medical problems:		
Any current medications:		

Number of birds in the household:

cagemates:

in the same area:

in other rooms:

Food:

How long is the bird usually alone:

for \_\_\_\_ hours/day

for \_\_\_\_ days/week

Is the bird normally confined to a cage:

a. yes \_\_\_\_ sometimes \_\_\_\_ always \_\_\_\_

when or why:

how long: \_\_\_\_ hours/day

size of cage: \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

equipment provided in the cage:

b. no (please describe housing conditions):

Description of Problem Behavior:

Age when animal first began showing problem:

Frequency and Duration / Changes in Pattern / Anything that seems to trigger the behavior:

Corrections or medical therapy applied to date:

Describe a typical 24-hour day in your bird's life:

Thank you for using PetFax.

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