

HISTORY QUESTIONNAIRE *guide*



FOR HEALTHY SKIN

HISTORY QUESTIONNAIRE GUIDE

Interpreting responses to the History Questionnaire for the pruritic dog

Certain distinctive features of the patient history will aid in the formulation of the differential diagnosis list for the pruritic dog.

PATIENT DETAILS	IMPLICATIONS
Name:	
Age:	All of the differential diagnoses for pruritus can be seen in young animals. If the pruritus commences in middle or older age, parasitic or infectious causes are more likely
Sex:	
Breed:	Breed predispositions recognised for atopic dermatitis and some infections, e.g. <i>Malassezia</i> dermatitis
Weight:	

PATIENT HISTORY	IMPLICATIONS
What is the main problem?	<ul style="list-style-type: none"> Provides an indication as to whether lesions are likely to be primary or secondary Which comes first, the itch or the rash? Pruritus prior to lesion development is suggestive of allergies. Can also suggest early flea, <i>Sarcoptes</i>, or <i>Cheyletiella</i> infestation Otitis is a common complication of atopic dermatitis and food allergies. Can also be an indication of <i>Otodectes</i>, bacteria or <i>Malassezia</i> Lesions before pruritus: exclude infectious and parasitic causes first Ensures owner's primary concern is recognised and can be addressed
Itching	
Ear infection	
Hair loss	
Rash	
Something else	
Age when problem first noticed?	All of the differential diagnoses for pruritus can be seen in young animals. If the pruritus commences in middle or older age, parasitic or infectious causes are more likely

PATIENT HISTORY (cont'd)	IMPLICATIONS
<p>How long has this problem been going on?</p> <p>A few weeks</p> <p>1-6 months</p> <p>6-12 months</p> <p>1-2 years</p> <p>>2 years</p>	<p>Sudden onset of severe continuous pruritus – consider <i>Sarcoptes</i> or flea allergy (lesion distribution will provide further information on the likelihood of these conditions)</p>
<p>How frequent is the problem?</p> <p>Continuous</p> <p>Seasonal</p> <p>Intermittent</p>	<p>Intermittent or seasonal pruritus – most consistent with seasonal parasitoses or atopic dermatitis</p>
<p>What areas are affected?</p> <p>Face (including chin/nose/eyes)</p> <p>Ears</p> <p>Neck</p> <p>Top of back</p> <p>Sides of body</p> <p>Bottom</p> <p>Front of legs</p> <p>Front paws</p> <p>Back legs</p> <p>Back paws</p> <p>Armpits/chest</p> <p>Abdomen/groin</p>	<p>Once secondary infections are excluded/ resolved, lesion distribution is indicative of certain conditions. For example:</p> <ul style="list-style-type: none"> • Face, ears, paws, axillae, ventral abdomen: atopic dermatitis, food allergy, <i>Malassezia</i> dermatitis, <i>Trombicula/Ixodes</i> ticks • Otitis externa/pinnal lesions: atopic dermatitis, food allergy, scabies • Caudal trunk, caudal/medial hind limbs, ventral abdomen: flea allergy • Contact regions (sparsely haired muzzle, feet, ventrum): contact allergy, atopic dermatitis, food allergy

CURRENT AND PREVIOUS TREATMENTS	IMPLICATIONS
Has your dog received any medication for the problem?	
Cortisone/steroids/prednisolone	
Apoquel	
Atopica/cyclosporine	
Antibiotics	
Medicated shampoos	
Ear drops	
Other	
Response to the medication	<ul style="list-style-type: none"> • Complete resolution of pruritus with oclacitinib or glucocorticoids (anti-inflammatory doses): most consistent with allergy • Partial resolution of pruritus with oclacitinib or glucocorticoids (anti-inflammatory doses): non-specific • Poor response of pruritus to oclacitinib or glucocorticoids: exclude demodicosis, scabies and infections
Complete response but relapsed when stopped	
Partial response	
No response	
Do you use any anti-flea products on your dog?	
No	Indicates likelihood of flea allergies. Remember to consider owner compliance.
Yes (state name of product(s) and how often used)	
Do you routinely bath/shampoo your dog?	
No	Excessive bathing may indicate risk of the bathing itself contributing to skin irritation. Also indicates likelihood of owner complying with medicated washes as part of multi-modal therapy.
Yes (state name of product(s) and how often used)	
Has your dog ever had a bad reaction to any drug, treatment or shampoo?	
No	
Yes (state name of product(s) and nature of reaction)	

DIET	IMPLICATIONS
Which of the following do you feed your dog?	
Dry dog food	
Wet/canned dog food	
Fresh meat (raw or cooked) Fish	
Table scraps	
Dog treats (raw hide chews, pigs' ears, schmackos etc)	Indicative of potential dietary allergens.
BARF (biologically appropriate raw food/raw meaty bones)	Will assist the clinician in selecting a truly novel protein/ carbohydrate diet in cases where a food elimination trial is indicated.
Supplements (vitamins, minerals, essential fatty acids, glucosamine etc)	
Other	
Have you tried feeding a special home cooked, hypoallergenic or prescription diet for the skin problem?	
No	
Yes (Detail)	

RISK OF CONTAGION OR HEREDITARY DISEASE	IMPLICATIONS
Are there any other pets in the household?	
No	
Yes (State animals)	
Do any of these animals have skin problems?	
No	
Yes (Describe)	If other animals in the household are similarly affected this may suggest contagious infections/infestations, e.g. fleas, Sarcoptes
Do you know if any of your dog's relatives have suffered from similar skin problems?	
No	
Yes (Describe)	Certain conditions have a genetic predisposition, e.g. atopic dermatitis
Do any human family members have skin problems that coincided with the dog's problem?	
No	
Yes (Describe)	If human family members are similarly affected this may suggest certain zoonotic infections/infestations, e.g. Sarcoptes

ENVIRONMENT AND LIFESTYLE	IMPLICATIONS
Approximately how much time does your dog spend OUTSIDE the house during the day?	Indicative of exposure to outdoor allergens such as plants and pollen vs indoor allergens such as house dust mite
None	
To toilet	
<3 hours	
3-6 hours	
6-12 hours	
>12 hours	
Where does your dog go for walks/exercise?	Indicative of potential exposure to allergens or infectious agents such as fleas and mites
Roadside	
Fields/grass	
Bush	
Beach	
Backyard	
Other (Describe)	
Does your dog have access to the whole house, including the bedrooms?	Indicative of likely dust load/exposure to dust mite, particularly carpeted bedrooms
No	
Yes	
Where does your dog sleep?	Indicative of exposure to likely allergens or infectious agents
Indoor (Describe)	
Outdoor (Describe)	
Outside the house, does your dog have access to a yard/garden?	
No	
Yes	

ENVIRONMENT AND LIFESTYLE (cont'd)	IMPLICATIONS
Does your dog have access to wildlife/farmland when outside?	Indicative of likely exposure to infectious agents, particularly <i>Sarcoptes</i>
No	
Yes	
Does your dog ever go to kennels or grooming parlours?	Indicative of exposure to likely allergens or infectious agents, e.g. infectious agents on clippers, contact allergies to shampoos
No	
Yes	
Does your dog swim?	<ul style="list-style-type: none"> • Wet ears may be more prone to otitis externa • Frequent swimming may limit the suitability of topical therapies as part of the management plan
No	
Yes (How often?)	

GENERAL HEALTH	IMPLICATIONS
Other than the skin problem, is your dog suffering from any other health problems at the moment or in the past?	<p>Indicative of other underlying disease:</p> <ul style="list-style-type: none"> • which may be contributing to the skin condition • which may require medications that influence the choice of concurrent therapies for the skin problem
No	
Yes (Details)	
Is your dog on any medications for other health problems?	
No	
Yes (Details)	
Has your dog gained or lost weight within the last few months?	
No	
Yes (Details)	
Is your dog less active than normal?	
No	
Yes	

GENERAL HEALTH (cont'd)	IMPLICATIONS
Does your dog have a poor appetite or excessive thirst?	
No	
Yes	
Have there been any of the following clinical signs since the skin problem started?	
Coughing	
Sneezing	Indicative of other underlying disease: <ul style="list-style-type: none"> • which may be contributing to the skin condition • which may require medications that influence the choice of concurrent therapies for the skin problem
Vomiting	
Diarrhoea	
Abnormal urination	
Fits or seizures	
Hearing problems	
Abnormal sexual behaviour	
Abnormal heats/seasons	