

同情

PET PERSONALITY & CLINICAL SIGNS



| OWNER INFORMATION | | |
|-------------------------------------|-----------|---------|
| Name | Telephone | E-Mail |
| Address | | |
| ANIMAL INFORMATION | Name | Species |
| Sex <input type="checkbox"/> Intact | Age | Weight |
| Current Medications | | |
| Major Complaints | | |
| General Diet / Food | | |

| Fire | |
|--|--|
| Balanced | Unbalanced |
| <input type="checkbox"/> Lively | <input type="checkbox"/> Insomnia |
| <input type="checkbox"/> Playful | <input type="checkbox"/> Separation anxiety |
| <input type="checkbox"/> Communicative | <input type="checkbox"/> Restlessness or hyperactive |
| <input type="checkbox"/> Very friendly or affectionate | <input type="checkbox"/> Mental disturbance |
| <input type="checkbox"/> Loves to be petted | <input type="checkbox"/> Too noisy |
| <input type="checkbox"/> Center of the Party | <input type="checkbox"/> Crazy ("naked dance on roof") |
| <input type="checkbox"/> Sensitive | <input type="checkbox"/> Heart problems |
| <input type="checkbox"/> Normal mental activity | <input type="checkbox"/> Tongue ulceration |
| <input type="checkbox"/> "The Emperor" | <input type="checkbox"/> Scared without reason |



| Wood | |
|--|--|
| Balanced | Unbalanced |
| <input type="checkbox"/> Decisive or competitive | <input type="checkbox"/> Ligament or tendon problems |
| <input type="checkbox"/> Assertive or confident | <input type="checkbox"/> Liver problems |
| <input type="checkbox"/> Dominant or aggressive | <input type="checkbox"/> Red eyes |
| <input type="checkbox"/> Strong, fearless | <input type="checkbox"/> Irritable or angers easily |
| <input type="checkbox"/> Impulsive, hasty | <input type="checkbox"/> Ear problems |
| <input type="checkbox"/> Athletic-stamina | <input type="checkbox"/> Nail problems |
| <input type="checkbox"/> Alpha animal | <input type="checkbox"/> Footpad or foot problems |
| <input type="checkbox"/> Pioneer spirit | <input type="checkbox"/> Anal sac issues |
| <input type="checkbox"/> "The General" | <input type="checkbox"/> Seizure activity |

| Earth | |
|--|--|
| Balanced | Unbalanced |
| <input type="checkbox"/> Relaxed, laid back | <input type="checkbox"/> Diarrhea |
| <input type="checkbox"/> Friendly, loyal | <input type="checkbox"/> Constipation |
| <input type="checkbox"/> Round and large | <input type="checkbox"/> Loss of appetite |
| <input type="checkbox"/> Slow and consistent | <input type="checkbox"/> Vomits |
| <input type="checkbox"/> Serene and balanced | <input type="checkbox"/> Colic or abdominal pain |
| <input type="checkbox"/> Cares for others (motherly) | <input type="checkbox"/> Gum or lip disease |
| <input type="checkbox"/> Normal bowel activity | <input type="checkbox"/> Weak muscles |
| <input type="checkbox"/> Good appetite, easy-keeper | <input type="checkbox"/> Overeats – obese |
| <input type="checkbox"/> "The Mother" | <input type="checkbox"/> Excessive worrier |

| Water | |
|---|--|
| Balanced | Unbalanced |
| <input type="checkbox"/> Careful | <input type="checkbox"/> Hind end weakness |
| <input type="checkbox"/> Timid, shy | <input type="checkbox"/> Withdrawn |
| <input type="checkbox"/> Fearful | <input type="checkbox"/> Arthritis or disk disease |
| <input type="checkbox"/> Self-contained | <input type="checkbox"/> Urinary problems |
| <input type="checkbox"/> Hides or runs away | <input type="checkbox"/> Kidney problems |
| <input type="checkbox"/> Meditative/good observer | <input type="checkbox"/> Disturbed growth |
| <input type="checkbox"/> Long life span | <input type="checkbox"/> Deafness, bad teeth |
| <input type="checkbox"/> Strong teeth and bones | <input type="checkbox"/> Reproductive problems |
| <input type="checkbox"/> "Good Observer" | <input type="checkbox"/> Premature aging |

| Metal | |
|---|---|
| Balanced | Unbalanced |
| <input type="checkbox"/> Loves order | <input type="checkbox"/> Dry skin |
| <input type="checkbox"/> Obeys the rules | <input type="checkbox"/> Sinus problems |
| <input type="checkbox"/> Aloof, quiet | <input type="checkbox"/> Nasal discharge or congestion |
| <input type="checkbox"/> Independent | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Symmetrical body | <input type="checkbox"/> Breathing difficulty |
| <input type="checkbox"/> Disciplined attitude | <input type="checkbox"/> Cough |
| <input type="checkbox"/> Good hair coat | <input type="checkbox"/> Upper airway or lung infection |
| <input type="checkbox"/> "Good Organizer" | <input type="checkbox"/> Weak voice |
| | <input type="checkbox"/> Excessive sadness or grief |