

# Celebrate Seniors!

Please take a few moments to review the following age chart and complete the checklist below so we can review your pet's health together. This will help us uncover any hidden health issues your pet may have.

## How old is your pet, really?



Using the chart on the left, locate and circle the applicable age for your pet.

Name \_\_\_\_\_  
 Age \_\_\_\_\_ years  
 Weight \_\_\_\_\_ lb

### COLOR KEY

- adult
- senior
- geriatric

age	weight		age	weight			
	0-20			0-20	20-50	50-90	>90
1	7		1	7	7	8	9
2	13		2	13	14	16	18
3	20		3	20	21	24	26
4	26		4	26	27	31	34
5	33		5	33	34	38	41
6	40		6	40	42	45	49
7	44		7	44	47	50	56
8	48		8	48	51	55	64
9	52		9	52	56	61	71
10	56		10	56	60	66	78
11	60		11	60	65	72	86
12	64		12	64	69	77	93
13	68		13	68	74	82	101
14	72		14	72	78	88	108
15	76		15	76	83	93	115
16	80		16	80	87	99	123
17	84		17	84	92	104	131
18	88		18	88	96	109	139
19	92		19	92	101	115	
20	96		20	96	105	120	
21	100		21	100	109	126	
22	104		22	104	113	130	
23	108		23	108	117		
24	112		24	112	120		
25	116		25	116	124		

Charts courtesy of Fred L. Metzger, DVM, DABVP

## Is your pet acting his or her age?

We'd like to know if you've noticed any subtle changes in your pet's behavior or physical abilities.

Using the list at the right, please check any signs that apply.

### Is Your Pet...?

- Just not himself/herself  Yes  No
- Interacting less often with family  Yes  No
- Responding less often or less enthusiastically  Yes  No
- Changing in behavior/activity level  Yes  No
- Having difficulty climbing stairs  Yes  No
- Having difficulty jumping  Yes  No
- Exhibiting signs of increased stiffness or limping  Yes  No
- Drinking more often  Yes  No
- Urinating more often  Yes  No
- Changing eating patterns  Yes  No
- Noticeably gaining or losing weight  Yes  No

### Is Your Pet...?

- Losing housetraining habits  Yes  No
- Changing sleeping patterns  Yes  No
- Confused or disoriented  Yes  No
- Experiencing changes in haircoat, skin, or new lumps or bumps  Yes  No
- Scratching more often  Yes  No
- Exhibiting bad breath/red or swollen gums  Yes  No
- Showing tremors or shaking  Yes  No
- Other: \_\_\_\_\_
- \_\_\_\_\_
- Diet currently feeding: \_\_\_\_\_
- \_\_\_\_\_

Notes: \_\_\_\_\_