

# Psittacine Bird Case History Sheets (essential) questions



Age ..... Sex ..... Male/Female/Unknown

If sexed, method used was ..... DNA/Chromosomal/Endoscopy/Has laid an egg

Breed ..... Colour .....

Weight .....Kg

Other in-contact birds .....Yes/No

If Yes, Sex .....Male/Female Species .....

How long owned?..... Source was..Captive bred/Imported/Unknown

If captive bred .....Hand-reared/Parent-reared

Any loss of "voice" or change to pitch? ..... Yes/No Does the bird talk?.....Yes/No

Identification (Microchip, leg ring) .....

If leg ring.....Split ring/Closed ring

Mainly .....Indoor/Outdoor

If Outdoor, description of aviary .....

If Indoor, description of cage, usual position and time spent in it.....

.....

Type of perches ..... Size (Diameter) of perches .....

Is the cage covered at night? .....Yes/No

If Yes, when is it covered? ..... When is it uncovered?.....

Frequency of cleaning..... Disinfectant used.....

Diet (Full details, inc source) .....

..... Last meal .....

Supplements (type & frequency) ..... Source of water .....

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Droppings (describe and examine, gross & microscopic).....

Urine ..... Urates .....

Faeces .....

Chlamydophila test..... Yes/No,

If Yes, Positive/Negative on ELISA / Antibodies / DNA

If No, Last test was .....

Previous history of illness or treatments.....

Owner's current concern .....

**Observations prior to Handling:-**

- Any breathing problems?
- Any "Tail bobbing"?
- Any Perching/Standing difficulties?
- Any Sterotypical behaviour?

**Beak:-**

- Any problems eating?
- Is the Mandibular beak overgrown?
- Is the Maxillary beak overgrown?
- Any cracks?
- Any evidence of flaking or softening?
- Any Malocclusion/Deviation?
- Any swelling under mandibular beak?
- If yes,
  - Firm/Hard/Soft?
  - Needle biopsy ..... Yes/No

**Cere/Nostrils:-**

- Any discharge/stained feathers?
  - If yes, Sample (for Culture/Cytology) taken ..... Yes/No
- Any blockages?
- Any difference in size of nares?

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### **Eyes** (gross and ophthalmoscopic examination required):-

Any discharge or staining of feathers?

If yes, Sample (for Culture/Cytology) taken ..... Yes/No

Any "bubbling" of tears?

Any feather loss around orbit?

Any swelling (eye or periorbital), exophthalmus or prolapse of nictitans?

If yes,

Unilateral/Bilateral?

Firm/Hard/Soft?

Needle biopsy ..... Yes/No

Ultrasound examination ..... Yes/No

Any sign of discomfort or blepharospasm?

If yes,

fluorescein was Positive/Negative

Local anaesthetic used to examine ..... Yes/No

Any corneal lesion?

If yes, fluorescein was Positive/Negative

Any conjunctivitis or scleral congestion?

If yes,

Intra-ocular pressure was ..... mmHg

Sample (for Culture/Cytology) taken ..... Yes/No

Any purulent (caseous) material in conjunctival fossa?

Any purulent (caseous) material behind nictitating membrane?

Any iridal swelling or colour change?

Any opacity of the lens?

Any retinal lesions?

Any haemorrhage from pectens?

### **Mouth:-**

Is tongue normal & mobile?

Is glottis normal & clear?

Is choana normal & clear?

Any swelling?

If yes,

Firm/Hard/Soft?

Needle biopsy ..... Yes/No

Any discharge from glottis/choana?

If yes, Sample (for Culture/Cytology) taken ..... Yes/No

Any evidence of blood?

### **Ears** (behind feathers):-

Any crusting deposits?

If yes, microscopy showed mites ..... Yes/No

Any swelling?

If yes,

Firm/Hard/Soft?

Needle biopsy ..... Yes/No

Any feather loss?

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### **Thorax** (auscultation is required):-

Crop is full/empty?

If full,

Firm/Fluid/Mixture

Is it overfull?

Has bird been fed recently?

Any regurgitation?

Keel prominence suggests Normal/Obese/Thin?

Is breathing normal?

Any lung noises?

If abnormalities,

Radiographs were taken .....Yes/No

Endoscopy was performed .....Yes/No

Any murmurs?

If abnormalities, radiographs were taken .....Yes/No

### **Abdomen** (auscultation is required):-

Any evidence of enlargement?

Any evidence of eggs?

Is abdomen empty?

Are there normal air sac sounds?

If abnormalities,

Radiographs were taken .....Yes/No

Endoscopy was performed .....Yes/No

### **Feathers & Skin:-**

Any pruritus?

Is there evidence of pin feathers?

Is the bird "ruffled"?

Any feather loss?

If yes,\*\*

Is the bird moulting?

Does the owner see feathers pulled out?

Describe distribution of loss .....

Any Feather damage,

If yes,\*\*

Any evidence of trauma?

Any evidence of chewing?

Does the owner see chewing?

Describe distribution of damage .....

Any skin lesions? \*\*

Any swelling?

If yes,

Firm/Hard/Soft?

Needle biopsy .....Yes/No

Any crusting lesions?

Any evidence of obvious parasitic infestation?

Was preen gland (where present) normal?

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**\*\*If abnormalities of feathers or skin,**

- Psittacine Beak & Feather Disease was tested for ..... Yes/No
- Skin scrapes ..... Yes/No
- Skin biopsies ..... Yes/No
- Samples (for Culture) taken ..... Yes/No
- Blood samples were taken ..... Yes/No

### **Perineal area:-**

- Any swelling?
  - If yes,
    - Firm/Hard/Soft?
    - Needle biopsy ..... Yes/No
- Any contamination?
- Any evidence of blood?
- Cloacal examination was Normal/Abnormal/Not performed?

### **Feet & Wings:-**

- Any flight problems?
  - If yes, \*\*
    - Flight feathers have been clipped?
    - Has been pinioned?
- Any drooping of wings?
  - If yes, \*\*
    - Unilateral/Bilateral
- Any discomfort on flexion/extension of joints? \*\*
- Any evidence of swelling, especially of joints?
  - If yes, \*\*
    - Firm/Hard/Soft?
    - Needle biopsy ..... Yes/No
- Any lameness/limping? \*\*
- Are the claws overgrown?
- Are all toes present?
- Is grip normal? \*\*
- Any Bumblefoot? \*\*

**\*\*If any abnormalities,**

- Radiographs were taken ..... Yes/No
- Blood samples were taken ..... Yes/No