

What have you noticed?

Mark your observations. These groups are not required stages and do not diagnose distemper.

Dog's name: _____ Date: _____

Breathing and eyes

- ☐ Coughing or sneezing
- ☐ Discharge from the eyes or nose
- ☐ Red eyes
- ☐ Breathing differently

Appetite and digestion

- ☐ Eating less or refusing food
- ☐ Vomiting
- ☐ Diarrhea
- ☐ Less active than usual

Movement and balance

- ☐ Tremors or repeated muscle twitches
- ☐ Stumbling or losing balance
- ☐ Walking in circles
- ☐ Seizures or difficulty moving the legs

Nose and paws

- ☐ Thicker skin on the nose
- ☐ Hardened paw pads
- ☐ New cracks or sores

Other observations

In case of: Seizures, collapse, trouble breathing or sudden loss of movement: seek immediate veterinary care. Do not wait to complete this list.

Print and fill in by hand. Keep these sheets with the vaccination record.

When did the signs appear?

Record each change and when it happened. An approximate time is useful if you do not know the exact time.

Dog's name: _____ Date: _____

Date and time	Sign observed	Duration / frequency	What happened before

Changes in eating, drinking, stools or breathing

In case of: Seizures, collapse, trouble breathing or sudden loss of movement: seek immediate veterinary care. Do not wait to complete this list.

What to bring to the appointment

Gather the records you have. Note any information you do not know.

Dog's name: _____ Date: _____

Vaccinations: name and date / vaccination record

Medication already given: name, amount and time

Contact with other dogs and places visited

Questions for your veterinarian

References: Merck Veterinary Manual, Cornell and WSAVA (2024).

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Read the distemper guide and explore more articles about caring for your dog.

[Read the guide on our website](#)