

Feline Weight Management Clinic Questionnaire

Name: _____ Address: _____

Breed: _____ Age: _____ Sex: _____ Current Weight: _____

Please answer these questions as thoroughly as possible. Be honest with the amounts and types of food your cat receives. We need to know exactly what your cat eats at home in order to help him or her to lose weight. We won't be judging you and there are no wrong answers.

Eating Habits

1. What commercial pet food does your cat currently eat as his or her main daily meals?

Please list the brand name of the food, the type of food (canned, pouches and/or dry) and how much is given daily. If your cat has more than one type please list them all.

2. What treats or snacks does your cat get?

Please list the name, type and how many are given in a day or week and if they are given at a specific time of day. Include any treats given for training or good behaviour and any human food that your cat may receive such as milk or table scraps such as tuna, leftovers from the Sunday roast or pâté.

3. Who is responsible for feeding your cat his or her main meals?

4. Who gives treats and/or tit-bits to your cat?

Include anyone who gives treats to your cat including regular visitors to the home

5. Where in the home does your cat eat his or her food ? _____

6. What type of bowl does your cat eat and drink out of? _____

7. Do you have other pets at home? Yes / No (if no go to question 11.)

8. If yes, does your cat eat any of their food? Yes / No (if no go to question 10)

9. If yes, what type of food is this and how much do you think your cat gets?

10. If you have more than one cat at home do they share food bowls Yes / No

11. Does your cat raid bins or steal human food? Yes / No (if no go to question 13.)

12. If yes, how often? _____

13. Do you think other people might be feeding your cat when he or she is outside? Yes / No

14. Do you think your cat always seems hungry? Yes / No (if no go to Exercise & Activity)

15. If yes, does your cat pester you for food by begging, pawing, naughty behaviour or Meowing?

Please list the ways in which your cat lets you know that he or she is hungry

16. Do you give your cat food when he or she displays the above behaviour? Yes / No

Exercise and Activity

1. Does your cat go outside? Yes / No (if no go to question 3)

If yes how many times a day does he or she go out and for how long?

2. Does your cat use a cat flap? Yes / No

3. Will your cat play with toys or play games with you and what is his or her favourite?

4. If you have any other cats in the home, what is your cat's relationship with them?

Do they all get along? Have you noticed any tension between them?

Your Cat's Current Health

1. Does your cat have any known medical problems or health issues? Yes / No

If yes, please list them below

3. Do you have any concerns about your cat's health? Yes / No

2. Is your cat on any medications or supplements currently? Yes / No

If yes please list the name and daily amount. Please also include any home-given supplements such as cod liver oil, garlic tablets etc

Body Condition Score

Please use the body condition score chart included in this pack to score your cat from 1 to 9, based on the pictures and the text and circle the score that you think best describes your cat.

Body Condition Score **1 2 3 4 5 6 7 8 9**