



At **BBVS** our aim is to help you understand why your pet is exhibiting a certain behaviour and to address the problem using humane and scientifically proven treatment methods.

There is *always* a 'reason' for behaviour even if it is not necessarily obvious to us or appears maladaptive for the animal.

Therefore the best treatment for unwanted behaviour requires working out the 'reason' and the underlying emotion involved; by working on these we can ultimately affect how an animal responds in a given situation.

How an animal behaves is influenced by its genetics, early life experiences and current living environment. These components interact in a way that is unique to that particular animal. Because of this complexity, understanding the *cause* of a problem can require some 'detective work'.

To assist us with this we require that you **complete and return this questionnaire at least ONE week prior to your consultation.**

We also ask that you send, or get your regular veterinarian to directly send, a **copy of your pets' medical history.** Ideally this will include a recent (within 2 months) physical examination and blood/urine test results.

***If blood/urinalysis results are not available prior to the consultation and medications are prescribed, we will advise you return to your regular veterinarian for the tests which may delay treatment**.*

Please answer as comprehensively as possible. Completing this questionnaire should ideally involve all of the pets caregivers (interestingly we often see that family members can have a very different perception of what is happening!).

If you have any questions regarding the questionnaire please do not hesitate to contact us either by email or phone.

We look forward to working with you.

Kind regards;

Dr Emma

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Cat Questionnaire

Patients name:

Date:

OWNER DETAILS:

Title:

Surname:

First name:

Address:

Phone number/s:

Email:

Who is your regular veterinarian?

Contact details:

What is the best way to contact you?

- Home phone
- Mobile
- Email
- Other

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PET DETAILS:

Breed:

Colour:

Age:

Weight:

Sex:

Desexed: Yes No

If Y – at what age was the surgery performed?

CAT'S BACKGROUND:

Where did you get this cat?

Breeder – If yes, which one?

Rescue – If yes, which one?

Gumtree/newspaper advertisement

Friend

Pet store

Pound

Other

Why did you decide to acquire a cat?

Why did you choose this particular breed?

Why did you chose this particular cat?

How old was this cat when you acquired her/ him?

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How many animals did you have to choose from?

Why did you choose this cat over the others?

Describe your cat's behaviour as a kitten:

Please describe your cat's behaviour in general now:

Do you have any news about littermate behaviour? (Please describe)

Did you meet your cat's parents?

Mother: Yes No Father: Yes No

If Y please describe their behaviour:

Has this cat had other owners? Yes No

If Y how many?

Why was this cat given up?

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HOME ENVIRONMENT:

Please list ALL the people, including yourself, living in your household:

Name	Relationship to owner	Occupation	Hours away from home/day	Age
	SELF			

Who else has regular contact with the cat? E.g. Dog-walker, extended family, neighbours.

Please list ALL of the animals in your household:

	Name	Species E.g. dog, cat, bird.	Breed	Male/Female	Desexed Y or N	Age
1						
2						
3						
4						
5						
6						
7						
8						

In what order were the animals obtained? E.g. 2, 4, 1, 3....

What is your cat's relationship to the other animals? (E.g. friendly, hostile, fearful)

Please describe:

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How would you describe **your** relationship with your cat?

Do other human members of your family have a similar relationship to the cat?
Please describe:

Do you have any physical ailment(s) that influences your ability to interact with your cat?

What type of area do you live in?

Rural Suburbs Town Other

What type of house do you live in?

Have you moved since acquiring your cat? Yes No

If Y how many times?

How long since the last move?

How did your cat respond to the move?

Has your household (people or animals) changed since acquiring your cat?

Yes No

If Y please describe:

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Have you owned cats before? Yes No

If Y please specify:

Have you owned other pets before? Yes No

If Y please specify:

What happened to them?

MEDICAL HISTORY:

What medical problems has your cat had? Please list all and dates if known:

Is your cat on any medication **now** for any medical problems? Yes No

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If Y please list all medications including dose and frequency, what they are for, and expected completion date:

Is your cat on parasite control? Yes N

If Y, what type?

Is your cat on any medications now for behavioural problems? Yes No

If Y please list all medications including dose and frequency, what they are for:

Are you giving your cat any herbal treatments/supplements (Rescue Remedy, St John's Wort etc?)
 Yes No

If Y please list all medications including dose and frequency, what they are for:

What response has there been to each medication?

Any other medical concerns?

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DIET AND FEEDING:

Who feeds the cat?

Where do you feed the cat?

What do you feed your cat? (Please be specific, e.g. Brand name)

How much do you feed? (Please be specific)

Meal times: am pm

Does your cat eat all her/his food at once? Yes No

If not, how long do you leave it down?

What is your cat's favorite treat?

DAILY SCHEDULE:

Please describe your cat's daily routine:

Midnight

1am

2am

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3am

4am

5am

6am

7am

8am

9am

10am

11am

12pm

1pm

2pm

3pm

4pm

5pm

6pm

7pm

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8pm

9pm

10pm

11pm

Midnight

Do you play with your cat? Yes No

If Y how?

What are your cat's favorite toys?

What other toys does your cat have?

Does your cat use a cat flap/door? Yes No

What percentage of time does your cat spend indoors and outdoors?

% indoors

% outdoors

During this time is that cat free ranging or in an enclosure?

How does your cat behave when you are leaving the house?

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How does your cat behave when you return?

If left alone, where is the cat?

Where does your cat sleep at night? (Please be specific, i.e. outside, inside, in your bedroom, on your bed etc.)

On a typical day, how many hours does your cat sleep or rest?

Where is your cat when you have guests?

Why?

How does your cat behave with **familiar** visitors? (Adults, kids, other animals)?

How does your cat behave with **unfamiliar** visitors (Adults, kids, other animals)?

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How does your cat behave with the veterinarian?

When does your cat 'Meow'?

When does your cat hiss/growl?

How does your cat behave when he sees other cats through the window or in the yard?

ELIMINATION BEHAVIOUR:

Does your cat use a litter tray? Yes No

Does your cat ever have accidents inside the house? Yes No

If Y are the accidents urine or faeces?

How many litter trays do you have?

Where are they located?

What kind of trays are they? (Open, closed, high sides)

What type of litter do you use?

How often do you clean them and how?

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Does your cat cover its urine/stools?

SOCIAL BEHAVIOUR:

Does your cat respond to any cues such as sit, come etc.? (Please specify which cues)

Does your cat know any tricks? Yes No
(Please describe)

Does your cat have a scratching pole or favourite scratching area? Yes No
(Please describe)

Does your cat groom, lick or bite himself excessively? Yes No

What is your cat's activity level in general?
 Low Average High Excessive

Any other comments?

PRESENTING PROBLEM(S):

Why are you seeking help/advice?

What has prompted your visit?

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What is the main behaviour problem or complaint?

Why is the behaviour a problem?

When did you first notice it?

How frequently does the problem (or problems) occur? (I.e. how many times daily, weekly or monthly):

Has this problem changed in frequency? Yes No
If Y please describe?

Has this problem changed in intensity? Yes No
If Y please describe?

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Does your cat have any other problem behaviours?

Please describe in detail the last few times the (main) problem has occurred. Try to include as much detail as possible i.e. where it took place, time of day, who was present, what happened etc.

1. Most recent incident: Date:

2. Second to last incident: Date:

3. Third to last incident: Date:

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Any other significant incidents:

What have you done to try to correct the problem/s so far?

How successful has this been?

How do you (and other members of the family) discipline your cat for this or any other problem?

What are your goals for treatment?

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WHICH OF THESE STATEMENTS APPLY TO YOU:

I am here only out of curiosity; the problem is not serious;

I would like to change the problem, but it is not serious;

The problem is serious. I would like to change it, but if it remains unchanged that is alright;

The problem is very serious and I would like to change it, but if it remains unchanged I will keep my cat;

The problem is very serious and I would like to change it. If it remains unchanged I will have my cat euthanized or have to give him/her up.

Owner signature:

Date:

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