



Date of Consultation:

Case Number:

BACKGROUND INFORMATION

Your Name:

Address:

Daytime Tel. No:

Home Tel No:

Referral Veterinary Surgeon:

Address:

Tel. No:

Email:

Name of cat:

Breed/Type:

Age:

Sex:

Is your cat neutered?

If so, when was it done?

Early History:

How old was your cat when you obtained it?

Can you remember where he/she came from?

Was he/she re-homed or from a rescue centre?

Why was he/she re-homed?

Diet:

What do you feed you cat?

How many times a day is he or she fed?

When do you feed him/her?

Do you give any supplements, e.g. vitamin pills?

Does he/she enjoy food or are they finicky

Do you give her tit-bits? If so, what?

Medical History:

Does your cat have any current medical problems to your knowledge?

Do you know of any previous medical problems?

Is he/she on any current medication?

Environment:

Does you cat have access to all areas of the house?

Does he or she go outside?

Is there free access outside? Is this via a cat flap?

Is the cat allowed to go out at night, or just during the day?

Does he or she tend to go out for long periods of time? For how long approximately?

Does he/she go far? For example, does he ten to just sunbathe on the door step, or go further a field?

Where does he or she sleep at nigh and during the day?

Does he/she scratch outside? What about inside?

Toileting:

Does the cat use a litter tray indoors? If so, what kind of litter do you use?

How many litter trays do you have? Where are they positioned?

Do you see your cat urinating or passing faeces in the garden/outside?

Has the cat ever done this inside apart from in litter trays? If so, where?

Have you noticed your cat spraying inside or outside?

Human Interaction:

Does the cat have any toys?

Do you play with the cat? If so, for how long each day approximately? What games do you play?

Does your cat tend to follow you about the house when you are at home?

Does the cat sit on your lap? Does he/she sit on everybody's lap equally?

Do you stroke the cat when it is on your lap? Do you ever have any problems doing this?

Does your cat ever suck or chew on your clothes? If so, what type of material is preferred, and when does it happen?

Does he or she suck or chew anything else? If so, what and when?

Other cats:

Are there other cats in the neighbourhood? For example, do your neighbours have cats?

Do any other cats come into your garden?

Do they, or have they ever, come into your house?

Please use this page to draw a plan of your cat's territory. If you have an indoor cat, draw a plan of the house and if an outdoor ca include the garden and/or surrounding area. As cats are such territorial animals such plans are very useful in making an accurate diagnosis of you pet's problem. Please include, if possible: The site of the doors, cat flaps, feed bowls, sleeping places and litter trays; the site of inappropriate toileting, spraying, scratching or chewing; Your property boundaries, including what lies on the other side, such as other cats, dogs, children, main road.

THE PROBLEM

Describe the problems you are having with your cat in as much detail as possible.

What happens immediately **BEFORE** your cat displays these behaviours? Try to think both what you and your cat are doing when the problem occurs.

What happens immediately **AFTER**? Again, think about what you do, and what the cat does.

When did the problem begin? Can you remember the first time it happened?

When does the problem occur? Is it in any particular circumstances?

How frequently, on average, does the problem occur? Do you think it is becoming more frequent, less frequent or staying the same?

When does it occur? Is it , for example, always in the same place?

Who is usually present at the time, if anybody?

When was the last incident, and can you describe it?

Have there been previous attempts to cure this problem? (If so please describe)

Other Problems:

Does your cat have any other problems? For example, is he or she nervous of: -

- Children?

- Strangers?

- Any family members?

- Dogs?

- Loud noises?

Is the cat good to: -

- Groom
- Stroke?
- Pick up?

Are there any other problems with the cat that you would like to discuss at the consultation?

REHABILITATION:

How much time do you feel able to commit to working with your cat to solve these problems?

What would you envisage if the behaviour problem persists?