

Inappropriate Urination Questionnaire

Please answer the following questions:

Is your cat using the litter box? ☐ Yes ☐ No ☐ Sometimes

If no or sometimes, where is he/she urinating? _____

Does he/she defecate in his/her box? ☐ Yes ☐ No ☐ Sometimes

Is he/she ☐ Spraying or ☐ Squatting? Please explain further _____

Have you noticed if he/she is straining? ☐ Yes ☐ No

Have you seen blood in his urine? ☐ Yes ☐ No

When did you first notice a problem? _____

Is he drinking more water than usual? ☐ Yes ☐ No

How many cats are in your household? _____

How many litter boxes do you have? _____

Which kind of litter do you use? ☐ Clumping or ☐ Non-clumping ☐ Scented or ☐ Unscented

How often do you scoop the box? ☐ Daily ☐ 2x Daily ☐ Weekly ☐ Other _____

How often do you clean/wash all the boxes? ☐ Daily ☐ 2x Daily ☐ Weekly ☐ Other _____

Did you recently change litter brands or do you constantly change brands of kitty litter? ☐ Yes ☐ No

What brand of kitty litter do you use? _____

Do the litter boxes have hoods? ☐ Yes ☐ No

Do the litter boxes have liners? ☐ Yes ☐ No

Have you recently moved? ☐ Yes ☐ No

Any new stresses in your life, such as a new pet, new baby, new job schedule, etc.? ☐ Yes ☐ No

Is your cat displaying other signs? ☐ Weight loss ☐ Vomiting ☐ Diarrhea ☐ Listlessness

☐ Appetite loss ☐ Other _____

What do you feed your cat? _____

Which do you prefer to give your cat? ☐ Liquid or ☐ Tablets

Signature _____ Phone # _____ Date _____