

Cat Hospital of Vero Beach

Behavior Questionnaire – Inappropriate Urination

How many cats are in your home? _____

How many males? _____ How many females? _____

Are all males in the home neutered (circle)? Yes / No

Are all females in the home spayed (circle)? Yes / No

What are ages of all your cats? Cat 1 _____ Cat 2 _____ Cat 3 _____

Do you have any dogs or any other pets in the home (circle)? No / Yes: _____

Do you see stray / feral / or owned outdoor cats frequently in your neighborhood (circle)? Yes / No
Or specifically in your yard? _____

What is the total number of litter boxes in your home? _____

What type of litter do you use (check)? Clumping Gravel Litter pearls Wheat based?
 Corn based Yesterday's News Other: _____

Have you changed types or brands of litters recently (circle)? Yes / No

Do you have the same type of litter in all your boxes (circle)? Yes / No

How often do you remove solid urine clumps from litter box(es)? _____

How often do you remove solid waste from the litter box(es)? _____

Do you ever “top off” with fresh new litter after you have removed solid urine or waste? Yes / No

How often do you completely dump all the litter, clean the litter box and replace with completely fresh litter? _____

Are deodorants used in the cleaning process (circle)? Yes / No

Are room fresheners used in or near your litter box(es) (circle)? Yes / No

How old is each of your litter box(es)? _____

How many cats actually share a litter box? _____

Are liners used in your litter box (circle)? Yes / No

If liners are used, are they scented (circle)? Yes / No

Do any of your boxes have hoods (check)?

All boxes have hoods

Some boxes have hoods?

No boxes have hoods?

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Describe cat's behavior in the litter box:

- Does he get in? _____
- Does he stand outside? _____
- Does he dig in or dig out? _____
- Does he get in and out as quickly as possible? _____
- Or, does he spend a lot of time digging around both before and after urinating or defecating? _____
- Are all four of his feet in the box when using it? _____
- PLEASE DESCRIBE: _____

Are you using a litter box that allows you to flush after scooping the soiled portions from the box?

___ Yes ___ No

If not, do you dispose of solid litter out of doors? Yes / No

How long after it has been scooped is it taken outside? _____

How deep (in inches) is the litter in each of the boxes? _____

List all types of litter used for each box: _____

Are any of the liter types scented? _____

Does the cat(s) respond differently to any of the different styles of boxes or litters, or size of box and depth of litters? _____

Is the cat(s) ever allowed outside? _____

Does the cat eliminate in the presence of other animals or people, or is the elimination behavior secret? _____

Has the cat ever had any variation in whether or not he covers his feces or urine, and is any of that variation associated with the presence or absence of any other situation or cat? _____

Does the cat ever vocalize while he eliminates? Yes / No

Will the cat spray against the back of a covered or tall-backed litter box? Or on the wall against which the litter box sits? _____

Does the cat ever use a shower or bathtub for elimination? If so, how frequently? _____

When and where did you first notice the occurrence of inappropriate urinations/defecations?

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Were there any events that you may be aware of that may have precipitated the start of this behavior? (New child in home, visitors in home, owners on vacation just prior to or at the time of the occurrence of the inappropriate behavior, construction in home, inadvertent access to litter boxes, loud noise that occurred just as the cat was in the box, owner recently changed hours worked and therefore cat's routine has changed, owner going through a stressful time, new cat or dog in home, etc...)? _____

If your cat is inappropriately urinating, is the volume of urine normal? _____
Describe (Small? / Large?) _____

Do you see any visible blood in the urine? _____
Does your cat consistently urinate (defecate) outside the litter box or will he sometimes use the box? _____

Has your cat ever been on medication for inappropriate urination (circle)? Yes / No
If you answered yes to the above question, please name the medication(s), dosage(s), and length of time that your cat was on the medication(s) if known? _____

If your cat is inappropriately defecating, is the stool normal size? Normal color? Any blood?
Any mucous? _____

Have you actually SEEN your cat in the act of not using the litter box? If so, do you perceive that your cat is in any discomfort when urinating or defecating? _____

In your opinion, do your cats seem to get along well? _____
Do they curl up and sleep together? _____
Do they play together? _____ Do they merely tolerate each other? _____

To the best of your knowledge, are any of your cats ever "attacked" or "pounced upon" by one of your other cats just as he is getting into or out of the litter box? _____

Have you noticed, recently or otherwise, any changes in the "cat dynamics" in your home? (Previously unchallenged dominate cat now being challenged? Two cats who previously got along well not getting along? Etc.) _____

Does the cat that is known not to be always using the litter box have any significant history?

Is his or her behavior normal otherwise at this time? _____
Have you noticed any changes in his or her appetite? _____
Weight? _____ Water intake and urine output? _____

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Have your other cat(s) had any recent significant health history? In particular, have any of your cats been recently diagnosed with a gastrointestinal problem, diabetes, kidney failure, urinary tract infection, hyperthyroidism, etc?

Draw a map (**on the following page**) of your home – include all screen doors, inside doors, and front and back doors; also include locations of all letter boxes, (assign each a number – see paragraph below) exact dimensions of each litter box, and whether or not each or any of the boxes has a hood. Also include locations of the washer and dryer, and any furniture that is in the vicinity of the litter box(es). Also indicate which windows or doors give your cat(s) visual access to the outside. Indicate all areas where you have discovered inappropriate urination or defecation occurring. Note whether this is occurring on a flat surface (carpeted area, throw rug, tile or hardwood floor, clothes on the floor, plastic on the floor), or on a horizontal surface (the wall, inside of a door...)...Also indicate which portions of the house each cat “hangs out in” most frequently...And if these areas are on elevated surfaces (cat tree, window sill, countertop, etc.)...Indicate, too, locations of all cat food bowls...

If more than one litter box, prioritize them as to which box(es) are used most frequently (#1 – used most frequently; highest number should indicate the box that is used the least; if all boxes used equally, rate them all a “1”).



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MAP PAGE