



## Undesirable Vocalization Questionnaire

### General Information

Name of Pet Parent:

Address:

Email Address:

Phone Number:

Kitty Patient's Name:

### Detailed Information of Condition

Is your kitty vocalizing or howling?  Yes  No

If so, is it:  Mild  Moderate  Excessive

When does the vocalization occur? (e.g. time of day) \_\_\_\_\_

When did the behavior start?

Have you observed any other odd or abnormal behavior?  Yes  No

If so, describe in detail:

Has your kitty gone to the vet for the undesirable vocalization?  Yes  No

If yes, was there a diagnosis? Explain:

Has your kitty been diagnosed with Hyperthyroidism?  Yes  No

If yes, are they on thyroid medication?  Yes  No

Does your kitty cry in front of closed doors?  Yes  No

If so, when they do this, do you open the door for them?  Yes  No

Have you tried getting up and sitting in a different room until your kitty calms down?  
 Yes  No

Do you engage with and talk to your kitty, and try to get them to stop crying? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you tried ignoring your kitty when they vocalize? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, for how long? _____
Do you punish your kitty when they are being vocal? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:
From the windows in your home, can your kitty see: <input type="checkbox"/> outdoor cats <input type="checkbox"/> other neighborhood pets <input type="checkbox"/> prey animals
Does your kitty like climbing? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your kitty like climbing on top of furniture? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are they vocal during meal preparation? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your kitty climb on kitchen counters during meal preparation? <input type="checkbox"/> Yes <input type="checkbox"/> No
How much are they fed per meal and how frequently are they fed? Describe meal time:
Do they jump on the dining room table when you are eating? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are there other undesirable behaviors related to climbing, jumping and vocalizing? Describe:
Does your kitty scratch your furniture? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the furniture they are scratching near a window or exterior door? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you done anything to discourage the behavior? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, explain:



## Comments

Please list any other comments you may have:



424-570-9477

10866 Washington Boulevard #1227 Culver City, CA 90232

[www.thekittyshrink.com](http://www.thekittyshrink.com)

[thekittyshrink@gmail.com](mailto:thekittyshrink@gmail.com)

