



## The Kitty Shrink Inappropriate Pooping Questionnaire

General Information	
Name of Pet Parent:	
Address:	
Email Address:	Phone Number:
Kitty Patient's Name:	

Kitty's Medical History
Describe your kitty's poop: <input type="checkbox"/> formed <input type="checkbox"/> runny <input type="checkbox"/> soft <input type="checkbox"/> hard
What color is the poop?
Have you seen blood in the poop? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what color was the blood? <input type="checkbox"/> bright red <input type="checkbox"/> dark red <input type="checkbox"/> tarry red
Have you observed your kitty straining to poop? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your kitty cry (vocalize) when pooping? <input type="checkbox"/> Yes <input type="checkbox"/> No
How would you describe your kitty's water consumption recently? (e.g. drinking less, drinking the same, drinking more)
Has your kitty been diagnosed with IBD (Inflammatory Bowel Disease)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has your kitty been diagnosed with Hyperthyroidism? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has your kitty been diagnosed with any other medical issue we may need to know about? <input type="checkbox"/> Yes <input type="checkbox"/> No   If so, what was the diagnosis?
If yes to any medical diagnoses above, what treatment is your kitty receiving? (e.g. medication and/or Rx diet)

### Detailed Information of Condition

Does your kitty poop in the litter pan daily?  Yes  No

How frequently does your kitty poop outside the litter pan? \_\_\_\_\_

When did your kitty start pooping outside the litter pan? Explain:

Where in your home does your kitty inappropriately poop the most?

Have you changed any of your daily routines?  Yes  No Explain:

Have you recently gone on a trip?  Yes  No

Are you gone for long periods of time?  Yes  No

Did any changes occur in your home prior to the new undesirable behavior?  Yes  No  
(e.g. Divorce, new pet, a move, new companion, change to home or environment)

### Multi Kitty/Pet Households

Has there been any hissing or fighting between your kitties?  Yes  No

Any hissing/fighting between your kitty and another pet? (e.g your dog)  Yes  No

Have you witnessed your kitties having a standoff?  
(e.g. staring intensely at each other)  Yes  No

Have you witnessed your kitties blocking each other around your home?  Yes  No



Or blocking each other when in the litter pan? <input type="checkbox"/> Yes <input type="checkbox"/> No	Explain below:
Is your kitty scared of any other kitty/pet in your home? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do your kitties eat together? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do your kitties sleep and snuggle together? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do your kitties groom each other? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If your kitty does something good, do you praise or reward them? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe:

### Discipline

Do you scream at or scold your kitty when they poop outside the litter pan? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you punish your kitty when they poop outside the litter pan? <input type="checkbox"/> Yes <input type="checkbox"/> No
If so, describe how you discipline your kitty after they have pooped:
Do you use any calming products to help with your kitty's anxiety and stress? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, which of the following have you used?
<input type="checkbox"/> Calming pheromone spray <input type="checkbox"/> Calming pheromone diffuser <input type="checkbox"/> Calming collar <input type="checkbox"/> Calming drops or supplements <input type="checkbox"/> Other: _____
In order to prevent your kitty's unwanted pooping, which of the following have you tried:
<input type="checkbox"/> Use of enzyme cleaners <input type="checkbox"/> Use of bleach <input type="checkbox"/> Use of potty pads <input type="checkbox"/> Use of shower curtain to cover area where they eliminate <input type="checkbox"/> Use of blanket to cover area where they eliminate <input type="checkbox"/> Other techniques
Describe in detail:
Have you used any deterrent sprays on the soiled areas? <input type="checkbox"/> Yes <input type="checkbox"/> No



## Litter Pan Information

How many litter pans do you have in your home? \_\_\_\_\_

Please list the type of pan(s) and their location:

Litter Box Location	Type of Box	Type of Litter
1.		
2.		
3.		
4.		
5.		
6.		

Do you have any litter pans in cabinets, furniture or faux plant pots?  Yes  No

Are your kitties' litter pans spread out throughout your home or are they all in one location?  Spread out  
 One location

Are your kitties' litter pans in a corner with only one entrance?  Yes  No

Are your kitties' feeding and water stations close to the litter pan?  Yes  No

How frequently do you scoop the litter pan?

Do you use a litter pan liner?  Yes  No

Do you use an air freshener close to or inside your kitty's litter pan?  Yes  No

Have you purchased a new litter pan recently?  Yes  No

Have you switched litter brands recently?  Yes  No

Have you moved the litter pan to a new location recently?  Yes  No

Have you used any attractant spray/powder in your kitty's litter pan?  Yes  No

Additional Comments:



## Comments

Please list any other comments you may have:



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