



Cat's Whiskers Veterinary Clinic

Weight Management Questionnaire

Cat's Name.....

1 What food are you currently feeding?

.....
.....

2 How much are you feeding?

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3 How often do you feed your cat eg once a day, twice a day, on demand! Etc?

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4 Who feeds your cat eg is one person in the house responsible for feeding?

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.....

5 Does your cat get any treats or titbits?

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6 Are there any other cats in your household?

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7 Does your cat go outside?

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.....

If the answer is no to the above question, please go to question 8.

If the answer is yes to the above question, then -

7a How much time do they spend outside?

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7b Are they active when they are outside, or do they curl up in a sunny spot & snooze?

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.....

7c Are they a successful hunter?

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.....

8 What toys/play centres are there in the house?

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.....

9 How much weight do you think your cat needs to lose?

.....

On a scale of 1 - 10 (1 being low and 10 being high) how convinced are you that your cat will benefit from losing weight?

1 2 3 4 5 6 7 8 9 10

On a scale of 1 - 10 (1 being low and 10 being high) how confident are you that you'll be able to stick with our recommendations in a weight loss programme?

1 2 3 4 5 6 7 8 9 10

Thank you, it would be very useful if you could get this back to me before your first weight management consult. I look forward to seeing you then.

It would also be very useful if you could keep a food and exercise diary for a week, if possible. Please fill it in honestly (!) with all food (and when it was fed eg morning, lunchtime etc), extras and exercise that your cat does. If you do not normally weigh out your cats food, then dish up the amount you would normally feed, then weigh it.

DAY 1

Food given

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.....
.....

Extras

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Exercise/play

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DAY 2

Food given

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Extras

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Exercise/play

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DAY 3

Food given

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Extras

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Exercise/play

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DAY 4

Food given

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Extras

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Exercise/play

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DAY 5

Food given

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Extras

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Exercise/play

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DAY 6

Food given

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Extras

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Exercise/play

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DAY 7

Food given

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Extras

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Exercise/play

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