

1. Which cat is not routinely using its litter box or showing pain or blood when it is eliminating?
2. What is your cat eliminating? (Urine, stool or both?)
3. If the elimination product is urine, is it deposited on vertical or horizontal surfaces?
4. Where in the home does house soiling occur? Draw a map of your home marking the locations of litter boxes, food and water bowls, and incidents of elimination outside the litter boxes. (*Use back of this sheet.*)
5. How often does elimination occur?
6. When does the problem occur?
7. How long has the problem been going on?
8. Describe any recent life changes such as moving, rearranging furniture, remodeling, a change in the members of the household.
9. What have you done to correct the problem?
10. Describe the litterboxes: size, box type, litter type.
11. How often do you scoop urine? Stool? Empty box, wash and replace with new litter?
12. How much play does your cat get each day?
13. How often does your cat go outside?