



5 Minute Nutrition Questionnaire for Your Pet

1. Pets

- a. Have you noticed any recent (past 6 months) changes in your pet's weight? If yes, explain.

- b. Describe what your pet does daily. How do its activities change during the week? Season? Years?

Is your pet hungry all the time? Not interested in food? Seem to be satisfied with feedings?

- d. Does your pet eat everything in one sitting? Nibble? Take one piece and go to another place to eat, going back & forth between the bowl and the other place? _____

- e. Does your pet chew its food, inhale it without chewing, chew one side of the mouth only?

- f. Does your pet have any medical conditions? _____

2. Diet (bring the ingredient and nutritional label or take a photo of it).

- a. What brand(s) of food? _____

- b. Do you feed homemade diet? No Yes. Explain _____

- c. Do you feed a vegetarian, raw or all meat diet? No Yes. Explain _____

- d. Do you add anything for flavor (i.e. gravy, broth)? No Yes. Explain _____

- e. What kind of treats and how often to feed them to your pet?

- f. What supplements and/or vitamins (powdered, gel caps, pills, etc) do you give your pet?

3. Feeding

- a. Does the same person feed your pet daily? Yes. Who? _____ No. Explain _____

- b. How much do you feed your pet? _____ How many times per day? _____

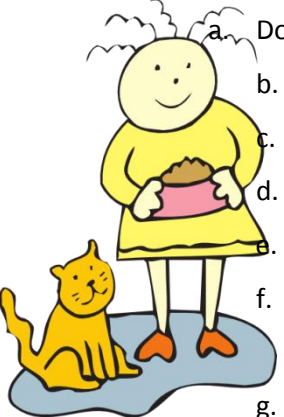
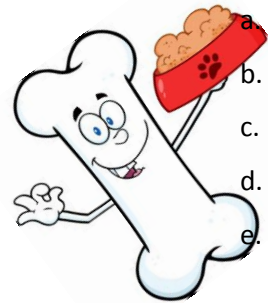
- c. What times of day do you feed your pet? _____

- d. Any other feeding habits you want to note? _____

- e. How long do you leave the bowl out (ie 15 mins, all day, etc)? _____

- f. When feeding medication, what do you put it in (food, pill pocket) or cover it with (peanut butter, cream cheese)? _____

- g. What are your pet's drinking habits (water out all day, certain amount, certain times)?



4. Environmental considerations



- a. Where is your pet housed (indoor, outdoor, both)? _____
 - b. How many pets do you have? _____ Do they share bowls? _____
 - c. Do they compete for food? _____ If so, explain _____
 - d. Does your pet have access to another pet's food? _____
 - e. Does your pet get into garbage, take food off of counters, high chairs or tables, hunt and eat other animals, get into other pet's or animal's food? _____
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Lizzie and our veterinarians recommend the following diet for your pet

Thank you for completing your
pet's nutritional questionnaire!

Name _____

Pet _____

Date _____