## Diet History

Pet’s Name: ___________________________ Date: __________________

Owner’s Name: __________________________________________________

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**How would you describe your cat’s weight?**
- Thin
- Ideal
- Overweight
- Obese

**How would you describe your cat’s activity level?**
- Not Very Active
- Moderately Active
- Very Active

**Does your cat eat any human food or table scraps?**
- Never
- Rarely
- About Weekly
- About Daily

**Do you ever feed a raw or home cooked diet?**
- Yes
- No

**Is your cat having any vomiting (including hairballs) or diarrhea?**
- Yes
- No

**Is your cat showing abnormal litter box habits?**
- Yes
- No

**What is the quality of your cat’s stool?**
- Normal
- Moist
- Log
- Pellets
- Cow Patty
- Liquid

**If you circled “Yes” for any of the above, please explain:**

__________________________________________________________________________________________________

__________________________________________________________________________________________________

__________________________________________________________________________________________________

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**Anything else you’d like us to know about your cat’s dietary habits?**

__________________________________________________________________________________________________

__________________________________________________________________________________________________

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**Please list any and all foods and treats that you feed your cat on a regular basis:**

<table>
<thead>
<tr>
<th>Brand</th>
<th>Type/Flavor</th>
<th>Can or Dry</th>
<th>Amount</th>
<th>Frequency</th>
<th>Fed Since</th>
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