

Questionnaire for Multiple-cat Households

Please answer the following questions in detail so we can best help you ensure the mental health and wellbeing of each of your cats is as good as it can be.

Your Name _____ Date _____

Please list all the cats you care for below (use the worksheet on page 5 for additional cats).

Cat's Name	Sex/Neuter Status	Breed (e.g., domestic shorthair)	Age	Age at Adoption & Adoption Source (shelter, friend, stray, feral, breeder)	Medical Conditions (if any)	Temperament (disposition)	Cat's Fears (e.g., noises, other cat[s], everything, other)
1.							
2.							
3.							
4.							

Outdoor Influences

Are there outdoor cats that come onto your property? Yes No How many? _____ If Yes, do you feed these cats? Yes No How many? _____

How do your cats react to their presence—no reaction, agitated (hiss, growl), or attack other housemate cats? Please describe each of your cat's reactions.

Do your cats have outdoor access? Please describe for each cat (e.g., harness and leash, outdoor enclosure, free-roaming) _____

For additional caregiver resources visit catfriendly.com/tension.

This questionnaire accompanies the 2024 AAFP *Intercat Tension Guidelines: Recognition, Prevention and Management*, which can be accessed at catvets.com/tension and are published in the *Journal of Feline Medicine and Surgery*.

Cat Interactions

Do your cats groom one another? If so, which cats? _____

Do your cats rub against one another? If so, which cats? _____) _____

Do your cats sleep together touching? If so, which cats? _____

Do your cats play together? Is the play mutual? Do any cats vocalize/cry out? If so, which cats? _____

When do you see your cats in the same room? Always or often Occasionally Never Only when I am present Only at feeding time

Check if any of your cats exhibit these behaviors	Which cat(s) display these behaviors?
<input type="checkbox"/> Staring (prolonged eye contact)	
<input type="checkbox"/> Stalking (following with a low body posture)	
<input type="checkbox"/> Blocking or preventing movement	
<input type="checkbox"/> Cornering	
<input type="checkbox"/> Chasing	
<input type="checkbox"/> Growling, hissing, or biting	
<input type="checkbox"/> Avoiding other(s)	
<input type="checkbox"/> Hiding 50% of the time or longer (e.g., under a piece of furniture or in another room)	
<input type="checkbox"/> Freezing in the presence of another cat	
<input type="checkbox"/> Scratching other cats/pets	
<input type="checkbox"/> Fighting with other cats/pets	

If you have more than two cats with different types of relationships, describe how the behaviors differ between one cat and another. _____

Undesirable Behaviors

Check if any of your cats exhibit these behaviors	Which cat(s) display these behaviors?
<input type="checkbox"/> Eating non-food items	
<input type="checkbox"/> Stealing human food or another pet's food	
<input type="checkbox"/> Biting or scratching people	
<input type="checkbox"/> Repetitive behaviors (e.g., pacing, excessive vocalization, overgrooming)	
<input type="checkbox"/> Urinating outside of the litter box	
<input type="checkbox"/> Defecating outside of the litter box	
<input type="checkbox"/> Not using the litter box at all	
<input type="checkbox"/> Anxiety or other problems when people are not home	
<input type="checkbox"/> Scratching household items (describe which items)	

Note to veterinary professionals: if urination or defecation outside of the litter box or absence of litter box use is indicated, ask additional house-soiling questions, catvets.com/house-soiling).

Home Environment

Please describe any changes in the home environment within the past 6 months. These might include house remodeling, house move, humans blending households and cats, adoption of a new pet, loss of a beloved pet, visiting pet, family members moving away, family bereavement, etc. _____

Where does each of your cats spend time in your home? Do some cats only stay in certain locations, or do all/any cats go everywhere? _____

Describe each cat's favorite resting areas and where they are located (include cat beds, carriers, cat trees or perches, on/under furniture, etc.). _____

Describe each cat's favorite play activities and how they occur (include cat toys, wand toys with people, commands, or cat-cat play). _____

Do you provide scratching posts or other scratching surfaces? If so, please note the number, type(s), location(s), and which cat uses each. _____

Has there been a change in scratching frequency, location, or substrate? Which cat(s)? _____

Do any of your cats show an increase in scratching behavior when outdoor cats are present (if applicable)? Which cat(s)? _____

How many litter boxes do you have and where are they located? _____

Cat Introductions

Please answer the question and then, on the lines provided, describe for each cat.

Were your cats separated for any period of time before being introduced to each other? Yes No Describe: _____

How long were they separated? 1–7 days 1–2 weeks Longer Still separated Describe: _____

How were they introduced? Through solid barriers Clear barriers Describe: _____

Describe how each cat was introduced and over what period of time: _____

Upon introduction, did you observe any of the following behaviors? (Check all that apply)	Which cat(s) display these behaviors?
<input type="checkbox"/> Hissing	
<input type="checkbox"/> Growling	
<input type="checkbox"/> Swatting	
<input type="checkbox"/> Chasing	
<input type="checkbox"/> Running away	
<input type="checkbox"/> Hiding	
<input type="checkbox"/> Fighting	

Feeding

How many food bowls/puzzle feeders are provided? _____

Are all cats fed in one location? Yes No If yes, where? _____

If there is more than one feeding location, where are they located? (Include which cat is fed in each location and if they can see each other.) _____

Please elaborate on why you feed in these locations and groupings? _____

Do any cats show daily or frequent regurgitation or vomiting of food? Which cat(s)? _____

How do the cats respond toward one another during food preparation? _____

How is each cat fed (e.g., bowl, puzzle feeder, other)? _____

Are there problems with a cat interfering with another cat who is eating (by taking their food or sharing their food)? Please list names of those taking and those taken from.

Continued from page 1

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5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

Thank you for taking the time to complete this questionnaire.