



# Clinical Animal Nutrition Survey© for Cats

A System Approach to Identifying Vitamin and Mineral Imbalances and Organ Distress  
Restricted to Professional Veterinary Use. A design of IVE, Inc.

NAME \_\_\_\_\_ AGE \_\_\_\_\_ Weight \_\_\_\_\_ OWNER \_\_\_\_\_ DATE \_\_\_\_\_

Put a number in the box in front of the symptom **only if it applies** to your cat. **LEAVE BLANK** if it does not apply.  
1 = mild or not often    2 = moderate or with some frequency    3 = severe, a lot, or all the time

GROUP ONE - SYMPATHETIC			
	Dry mouth, eyes, nose		Vomits with excitement
	Keyed up, unable to relax		Tends toward aggression or anxiety
	Fur loss on tail, legs, tummy		Hides a lot
	Excessive grooming		Prowls day and night
			Skin sores, lesions
			Vomits, nervous stomach
			Sheds a lot, especially when excited
			Obsessive compulsive behavior
			SCORE GROUP ONE: Add all columns =
			Number divided by 36 X 100 = %

GROUP TWO - PARASYMPATHETIC			
	Joint stiffness with rising		Subject to infections
	Always seems hungry		Eyes or nose watery
	Lazy, Slow starter, slow mover		Overweight
			Poor circulation, sensitive to cold
			Constipation, diarrhea, alternating
			Sleeps more than used to
			SCORE GROUP TWO: Add all columns =
			Number divided by 27 X 100 = %

GROUP THREE – CARBOHYDRATE METABOLISM, SUGAR HANDLING			
	Trembles, episodes of weakness		Large amount of urine in box
	Seizures		Hungry often, eats fast
	Disoriented at times		Change in appearance of eyes
	Difficulty walking straight		Weight loss
	Wheat, corn, rice, barley, oats in diet		Walks low in rear
			Belly distended but thin along back
			Behavior changes
			Drinks a lot of water, sits at bowl
			Overweight
			Body sagging in middle
			SCORE GROUP THREE: Add all columns =
			Number divided by 45 X 100 = %

GROUP FOUR - CIRCULATION			
	Exercise intolerance, lethargy		Coughing
	Significant loss of muscle mass		Seems disoriented at times
	Short rapid breathing, open mouth		Vomiting
	Weight loss		Enlarged heart and/or Heart murmur
			Weak in rear legs
			Difficulty breathing. Wheezing
			Cold rear legs
			Poor appetite
			SCORE GROUP FOUR: Add all columns =
			Number divided by 36 X 100 = %

GROUP FIVE – HEPATIC, GALL BLADDER			
	On meds over long time		Subject to allergies
	Stool watery or diarrhea		Seizures, tremors
	Appears bloated		Change in appetite
	Obese		Food sensitivities
	Recent or rapid weight loss		Anal Sac problems, Scooting
	Sporadic vomit/diarrhea		Recent stressful event
	Lethargic		Green / dark stool
			Stands with back arched
			Elevated cholesterol, triglycerides
			Elevated liver enzymes, lipase
			Ocular discharge
			Rubs at ears or face
			Increased salivation
			Restless
			SCORE GROUP FIVE: Add all columns =
			Number divided by 63 X 100 = %

GROUP SIX - DIGESTION			
	Picky eater or episodes or anorexia		History of pancreatitis
	Halitosis		Recurrent diarrhea
	Subject to allergies		Sores in mouth or on lips
	Sensitive stomach		Vomits fur balls
			Intermittent vomiting
			Excessive or chronic eye drainage
			Poor coat, sheds a lot
			Recent intestinal parasites
			SCORE GROUP SIX: Add all columns =
			Number divided by 36 X 100 = %

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GROUP SEVEN – A – ENDOCRINE			
	More than 10 years old	Stiff gait Oily, greasy coat	Drinking a lot, increased urination
	Weight loss	Nervous	Fast heart rate or pounding chest
	Warts	Aggressiveness	Back/neck problems
	Dry, scaly skin	Spastic movements, restless	Up all night, can't sleep
	Hungry all the time	Diarrhea or vomiting	Looks for cool places to rest
SCORE GROUP SEVEN A: Add all columns =			Number divided by 45 X 100 = %

GROUP EIGHT – MUSCULOSKELETAL (Calcium / Magnesium Metabolism)			
	Senior cat	Difficulty getting up and down	Losing muscle tone in legs or back
	History of any joint surgery	Arthritic, degenerative joint disease	Stopped or reduced jumping
	Back or disc problems	Back problems, stiffness	Walks low to the ground
	Weak joints, poor muscles	Dental tartar or cavity	Difficulty getting into litter box
SCORE GROUP EIGHT: Add all columns =			Number divided by 36 X 100 = %

GROUP NINE – RENAL, URINARY			
	Abnormal or frequent urination	History of bladder stones, crystals	Drinking more water
	History of bladder infections	Licking at penis or vulva	Urinate outside litter box
	Reduced renal function	Cries when urinating	In and out of litter box
	High blood calcium or phosphorus	Can't get comfortable	Diet mostly dry food
SCORE GROUP NINE: Add all columns =			Number divided by 36 X 100 = %

GROUP TEN – IMMUNE			
	Sheds, poor fur quality, dandruff	Runny eyes	Frequent infections
	Red bumps to skin	Recurrent sneezing	Dental infection
	Scabs, sores, crusts to skin or mouth	Ear infections, lesions	Has had cancer
	Frequently on antibiotics	Has FELV, FIV, AIDS, or Toxoplasmosis	Experienced a vaccine reaction
	Gets infections easily	Is over 12 years old	Lives with 4 or more cats
SCORE GROUP TEN: Add all columns =			Number divided by 45 X 100 = %

GROUP ELEVEN – PAIN			
	Lameness, abnormal gait	Recent surgery, dental infection	Weeping, red, cloudy or squinting eyes
	Withdrawn, hiding	Flicking tail	Shifting weight off area of body
	Reluctant to move	Change in mood, grumpy	Licking excessively an area of the body
	Dislike or intolerance of handling	Hunched back or sway back	Temperamental, growl at others
	Overall activity less than normal	Groaning, moaning, grunting	Change in toileting habits
	Looks depressed	Change in appetite & type of food willing to eat	
SCORE GROUP ELEVEN: Add all columns =			Number divided by 51 X 100 = %

**DIET:**

SCORE / TALLY	
Primary Group:	%
Secondary Group:	%
Tertiary Group:	%

### IMPORTANT

TO THE OWNER: Please list below the five main physical and or health complaints for this cat in order of importance:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_