

Questionnaire for **patients** exhibiting

repetitive behaviors

1. What is the behavior problem (e.g. snapping at the air, spinning, tail chasing, staring, excessive licking)?

2. When does this behavior occur?

3. How often does the behavior occur (e.g. multiple times a day, once a day, once a week, once a month)?

4. How long does each episode of the behavior last?

5. Are there any events or interactions that appear to trigger the behavior? If so, please describe:

6. Can you interrupt the behavior?

7. Does the behavior interfere with your pet's daily activities such as eating, playing, or sleeping?

8. What has been done so far to manage or treat the behavior problem?

If your dog displays oral repetitive behaviors, such as excessive licking or air snapping, please also answer the following questions:

If your dog snaps at the air, does he or she extend the head and neck before snapping at the air? _____

Does the behavior occur around meal times? If so, when? _____

Does your dog vomit or regurgitate. If so, how frequently? _____

Does your dog have soft stools or diarrhea? _____

Would you consider your dog's appetite decreased, normal, or increased? _____

What does your dog eat? Please list both food and treats (brand and flavor). _____
