

# Cognitive Assessment and Health Concerns for Cats

Date ..... Pet's Name ..... Age .....

Category	Sign	Does not occur or is not applicable	Occurs once a month	Occurs once a week	Occurs once a day/night	Occurs more than once a day/night
VOCALIZATION	Vocalizes more than usual during the day or evening (meows or yowls)					
	Vocalizes more than normal during nighttime sleeping hours (meows or yowls)					
INTERACTIONS	More clingy/seek more attention/more interest in being petted					
	Hiding/sleeping in unusual places					
	Less interest in being petted					
	Irritable or aggressive with family members					
	Irritable or aggressive with housemate pets					
	Less interest in greeting family members					
	More aloof/seek less attention					
SLEEP/WAKE CYCLE	Asleep more than usual during the day					
	Awake more than usual during the night					
	Paces/wanders at night					
HOUSE SOILING	Urinate inappropriately in the house/outside the litter box					
	Defecates inappropriately in the house/outside the litter box					
	Urinate but seems unaware					
	Defecates but seems unaware					

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DISORIENTATION	Appears lost/wanders between rooms without purpose					
	Paces back and forth excessively or circles					
	Stares into space or stares absently at the floor or walls					
	Stands in corners					
	Gets stuck under or behind objects					
	Doesn't seem to recognize family members or housemate pets					
	Doesn't seem to recognize or is startled by familiar objects					
	Walks or bumps into doors or walls					
	Has trouble finding treats dropped on the floor					
	Less interested in or less reactive to sights and sounds					
	Has trouble finding food or water bowl					
ANXIETY	Increased anxiety when owners are away/doesn't like being left alone					
	Increased fear of new places/locations					
	More reactive to sights and sounds					
	Agitated or restless during the day or evening					
	Agitated or restless during nighttime sleep hours					

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<b>ACTIVITY</b>	Less or no interest in play or toys					
	Less or no interest in play with housemate pets					
	Less or no interest in self-grooming					
	Less or no interest in exploring					
	Exhibits repetitive behaviors (excessive grooming, licking inanimate objects)					
<b>LEARNING AND MEMORY</b>	Seems to have forgotten trained commands or routines, verbal cues, or name					
	Difficulty learning new commands or routines					
	Decreased focus/hard to get and retain pet's attention					
<b>ADDITIONAL HEALTH CONCERNS</b>	Vomiting					
	Diarrhea					
	Constipation					
	Straining to urinate					
	Straining to defecate					
	Vision loss					
	Hearing loss					
	Hair loss or thinning					
	Decreased appetite					
	Decreased water consumption					
	Increased appetite					
	Increased water consumption					

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<b>ADDITIONAL HEALTH CONCERNS</b>	Hesitant to jump up or down from favorite spots (couch, bed, table, cat tree)					
	Hesitant or unwilling to use stairs					
	Limping					
	Hesitant or unwilling to use scratching post					
	Weakness or sluggishness					

### Resources for Cognitive Assessment Checklist

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