SECTION A - SIGNALMENT + GENERAL QUESTIONS Your name Your Cat's name Breed Colour Weight (approximate if don't know) Sex □ Male □ Male neutered Female □ Female neutered Age (if unknown, please estimate) Does your cat have access to the outside? □ Yes 🗆 No What is your cat's normal diet? SECTION B - GENERAL HEALTH How is your cat's appetite in general? □ Always hungry □ Eats all meals □ Picky eater Dever appetite Does your cat have episodes of diarrhea or vomiting? □ Frequent Occasional □ Infrequent □ Never Has your cat had any blood tests in the past? 🗆 Yes 🗆 No If yes, do you know what they were? Were any of these results abnormal? Does your cat ever have itchy skin or feet/ear problems/excessive licking? □ Yes 🗆 No Please Specify Does your cat suffer from any allergies (e.g. food, skin etc)? 🗆 Yes 🗆 No Please Specify Is your cat on any long-term medication? □ Yes 🗆 No If yes what is it and what is it for? Does your cat have any known breathing problems? □ Yes 🗆 No Please Specify Does your cat cough? □ Yes 🗆 No Does your cat ever collapse? □ Yes 🗆 No Does your cat suffer from any other medical conditions? □ Yes  $\square$  No Please Specify How is your cat's hearing? □ Normal hearing Some hearing difficulties Completely deaf □ Don't know How is your cat's eye sight? Normal □ Some visual difficulties Completely blind Don't know SECTION C - ABOUT THE FITS IN GENERAL How old was your cat when it had its first fit? (if unknown, please estimate) How is your cat in-between fits? Normal □ Abnormal Please Specify Has your cat's character changed since the fits started?

My cat wants to stay close to me My cat is more aggressive My cat is more restless My cat is more disorientated Other, please specify Have you noticed any of the following since your cat started to have fits? Weakness/not coordinated in the back legs Dramatic weight loss (>1kg) Difficulties seeing Difficulties hearing Less responsive to being called Not jumping Getting stuck in corners Toileting in the house inappropriately Other, please specify Has your cat had any blood tests in the past to investigate the fits? □ Yes 🗆 No Please Specify Has your cat had any other investigations in the past to investigate the fits (e.g. MRI)? □ Yes 🗆 No Please Specify Do all the fits look the same? □ Yes 🗆 No If 'no' please specify the number of types of fit your cat has suffered If 'no' please specify which was the first fit you were aware of your cat suffering If 'no', do different sounds trigger different types of fit? □ Yes 🗆 No If yes, please explain Would you be able to reliably provoke a fit with a noise? 🗆 Yes 🗆 No Do you feel that the seizures have affected your cat's quality of life? 🗆 Yes No Partly Do you feel that other symptoms aside from the seizures have affected your cat's quality of life? Yes  $\square \ No$ □ Partly □ Not applicable SECTION D - CHARACTERIZING THE FITS PLEASE FILL IN THE FOLLOWING QUESTIONS FOR EACH TYPE OF FIT Please describe the fit in your own words How often does your cat currently have this type of fit? More than once every day Once every day Once every week Once every 2 weeks Once every month Once every 2 months Once every 3 – 6 months How many of these fits does your cat have in a day? □ Only one fit in 24 hours Two or more fits in 24 hours ('cluster') What are the most number of these fits your cat has suffered in 1 day? On average how long does one of these fits tend to last? <5 seconds</p>  $\Box$  5 to 30 seconds  $\square$  30 seconds to 1 minute  $\Box$  1 to 2 minutes  $\Box$  2 to 5 minutes

□ No change in character

□ >10 minutes Has there been any change in how long these fits/seizures last since they began? □ Longer Shorter □ No change Has there been any change in how often these fits/seizures occur since they began? Increased occurrence Decreased occurrence □ No change Have there been any other changes in the fits since they started? If so please describe What does your cat do during one of these fits/seizures (please tick one box only that hest describes) □ My cat shakes violently during a fit □ My cat has jerking movements like it has been shocked during a fit □ My cat becomes unresponsive with no obvious movements during a fit Please describe these fits by ticking all appropriate boxes. □ My cat is confused and/or dazed and/or disoriented DURING the fit □ My cat is able to look into my eyes DURING the fit □ My cat is able to hear me DURING the fit □ My cat is conscious/aware DURING the fit □ My cat is able to respond to me DURING the fit □ The whole body is involved from the beginning □ One side of the body can be affected only □ At the start, only a part of the body is involved (e.g. it starts with the head or the leg), later the whole body is affected by the fit  $\hfill\square$  Just part of the body is involved (e.g. face or leg(s) only) throughout the fit □ My cat passes urine and / or feces DURING the fit □ My cat salivates/froths at the mouth DURING the fit □ My cat is able to stand DURING the fit Does your cat show any of the following signs during one of these fits? Please tick all boxes that apply: Shaking Excessive scratching Wobbly on legs/clumsy Muscle spasms □ Ear Twitching Licking movements ("air licking") Complete stiffness of limbs throughout Chewing movements □ Blinking Rolling of the head Which parts of the body are affected during one of these fits? Please tick all boxes that apply: Head and neck Shoulders and Front legs Back and abdomen □ Hips and back legs 🗆 Tail □ Specify if required In which part of the body does the fit start (tick one box only): Head and neck Shoulders and Front legs □ Back and abdomen □ Hips and back legs Tail □ Not sure What signs does your cat show WHILE RECOVERING from one of these fits? □ Wobbly □ Blind □ Sleepy □ Aggressive

□ 5 to 10 minutes

□ Restless □ Hungry Thirsty □ Clingy □ Clingy □ Normal immediately afterwards □ Other, please specify: How long does it take for your cat to COMPLETELY recover from one of these fits? ☐ My cat is completely back to normal within minutes of the fit □ My cat is completely back to normal within hours of the fit □ My cat is completely back to normal within 24 hours of the fit □ My cat takes several days to recover completely Can you predict if a fit is going to happen? □ Yes  $\square$  No If yes, please explain How do you respond when your cat has a fit? After an episode has started can you stop it? □ Yes 🗆 No Can you do anything that changes the course of the fit at all? Please explain briefly Which of the following can induce one of these specific fits? □ Sound □ Touch □ Light (e.g. flashing lights on TV etc) □ Heat  $\Box \ Cold$ □ Stress Excitement □ Other, please specify Does this type of fit ever progress into a different type of fit? 🗆 Yes  $\square$  No If yes, please explain Is it a particular noise that triggers this type of fit? 🗆 Yes 🗆 No If yes, please explain Would you be able to provoke this specific fit with a particular noise? □ Yes 🗆 No Considering the noise that most reliably provokes this specific seizure in your cat, how many times have you been aware of this noise triggering the fit in your cat?  $\Box \leq 2$ □ 3 to 5  $\Box$  6 to 10  $\Box > 10$ Are the sounds that induce these fits more high- or low-pitch? □ High-pitch □ Low-pitch 🗆 Both Please list any sounds that you know trigger these fits: Are the sounds that induce the fits more high- or low-pitch? □ High-pitch □ Low-pitch Both Do these fits ever occur without an obvious trigger? □ Yes 🗆 No Do you find that avoiding the sound allows for suitable control of this type of fit?

□ Yes 🗆 No □ Partly Have these trigger sounds always caused your cat to have these fits? Always caused these fits My cat was once unaffected by them Do you feel that these fits have affected your cat's quality of life? Yes 🗆 No □ Partly Do you feel that these specific fits have affected your cat's quality of life? □ Yes 🗆 No □ Partly Have you found that any of the following have made the fits worse? □ Cat treats De-worming Excitement □ Being in season □ Inoculations Has your cat received any medications for seizures (please repeat the remaining questions for each medication prescribed)? 🗆 Yes  $\square$  No If 'yes' what medication has been tried (dosage if available) and for how long? Did this type of fit respond to this medication? □ Yes 🗆 No □ Partly Did you stop giving your cat the medication and if yes, what was the reason? □ Yes  $\square$  No If yes, please explain