

Pet Feeding Questionnaire

Household Information

Date:

- 1) **Owner gender** male female
- 2) **Owner age** 18-30 31-40 41- 50 51-65 66+
- 3) **What is your highest level of education?**
- Did not complete high school
 - High school graduate
 - Some college or university coursework
 - Completed trade or vocational school
 - Completed college of university
 - Completed graduate or professional school
- 4) **Annual household income:**
- less than \$15,000
 - \$15,00-34,999
 - 35,000-74,999
 - more than \$75,000
- 5) **How many children under 10 live in your household** none 1 2 3 4 +
- 6) **Food Preferences. Do you eat the following foods?**
- | | YES | NO |
|---|--------------------------|--------------------------|
| Rare or medium cooked (pink) hamburger | <input type="checkbox"/> | <input type="checkbox"/> |
| Eggs with runny yolk | <input type="checkbox"/> | <input type="checkbox"/> |
| Raw oysters/Oysters on the half shell | <input type="checkbox"/> | <input type="checkbox"/> |
| Raw fish | <input type="checkbox"/> | <input type="checkbox"/> |
| Homemade cookie dough | <input type="checkbox"/> | <input type="checkbox"/> |
| Alfalfa or other raw sprouts | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you follow a vegetarian or vegan diet? | <input type="checkbox"/> | <input type="checkbox"/> |
- 7) **I recycle plastic, paper, and glass packaging materials**
- Never
 - Seldom
 - Occasionally
 - Frequently
 - Always
- 8) **I purchase organic foods for myself and my family**
- Never
 - Seldom
 - Occasionally
 - Frequently
 - Always

Dog Information

1. Please provide the breed of your dog _____ Age _____

2. Where do you get your dog's food ?

- grocery, discount, or pet store
- order from internet
- prepared at home
- other (specify)_____

3. Brand of Pet food fed during last week _____

4. In the past week, how many days was your dog fed the following items:

	Never	1	2-3	4-6	Everyday
raw beef	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
raw chicken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
raw pork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
raw eggs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dried pig's ears	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
rawhide chews	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cooked table scraps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
hot dogs or deli meats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial dog food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
neutraceutical, probiotic, or dietary supplement (please give name)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. The frequency that meals are offered to your dog is:

- less than once a day
- once a day
- twice a day
- all day (free choice)

6. My dog (check all that apply)

- Can run freely in a park or other location where other dogs may have visited
- Is confined to a fenced yard
- Is always on a leash
- Has contact with livestock (cattle, sheep, goats, pigs, or horses)
- Has contact with cats

7. How many dogs do you own? _____

8. I am a dog breeder Yes No

9. Cleaning frequency of feed bowl

- daily
- 3-6 times/wk
- 1-2 times/wk
- less than once a week

10. Cleaning frequency of water bowl

- daily
- 3-6 times/wk
- 1-2 times/wk
- less than once a week

11. Where do you feed your dog? Outside, garage, kitchen, kennel, other

12. Date of last Veterinary exam (month/yr) _____

13. Has your dog been vaccinated in the past three years? Yes No

14. How much money do you estimate you spend on pet food each month per dog?
\$ _____

Please indicate your level of agreement with each of the following statements

	Strongly disagree	Disagree	Indifferent	Agree	Strongly Agree
a. Pet food should only contain organically grown ingredients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The choice of pet food I feed has environmental impacts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The pet food I feed reflects how much I care about my pet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Diets containing raw meat are healthy for dogs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Feeding commercially prepared feed may be hazardous to dogs' health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Feeding raw meat to dogs may be hazardous to dogs' health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Please rank the following factors in influencing your choice of dog food

	Unimportant	Indifferent	Somewhat Important	Moderately Important	Very Important
a. Nutritional value of the feed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Composition (Ingredients)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Absence of preservatives, additives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Product freshness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Pet acceptance or preference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Ability to prevent health problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Ability to treat current health problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Please rank the importance of the following sources of information concerning your choice of your dog's diet:

	Unimportant	Indifferent	Somewhat Important	Moderately Important	Very Important
a. Personal consultation with veterinarian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Dr. Pitcairn's <i>Complete Guide to Natural Health for Dogs & Cats</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Other books specify_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Pet Food Manufacturers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Internet url:_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (please specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>