**Appendix 1: Owner Survey**

Cat’s Name:­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Why was your cat prescribed Clavamox?

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1. How long was your cat administered Clavamox?

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1. Were there any other medications that were also prescribed?

 Yes, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 No

1. Was your cat on any medications prior to Clavamox?

 Yes, please list: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 No

1. Did you notice any of the following side effects with your cat while administering Clavamox (please check all that apply)?

 Decreased appetite

 Vomiting

 Diarrhea

 Other side effects: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If your cat had side effects, when were these side effects first noted? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. If your cat had side effects from Clavamox administration, did your veterinarian do any of the following (check all that apply):

 Prescribe additional medication (i.e. anti-nausea, anti-diarrhea, probiotics, appetite stimulant)

 Change to a different antibiotic

 Discontinue the antibiotic

 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Did any therapy help reduce the severity of side effects?

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