## Quality of Life Assessment

MN Pets has compiled the most important aspects to consider when thinking about your pet's end of life decision. We know this is not an easy decision to navigate and every pet is unique, please don't hesitate to touch base with us to discuss results or anything else you may be seeing.

1 = All of the	e time	2 = Sometimes	3 = Never	Score 1-3	Running Total
Mobility	When your pet moves, is capacity diminished?				
	Has your pet lost the ability to move around unassisted?				
	Does your pet struggle to walk on your flooring?				
	Does your pet struggle to groom themselves or stay clean?				
	Is your pet avoiding certain positions or lying down?				
	ls nighttime mo	ore difficult for your pet?			
	Has your pet's	sleep schedule changed?			
Nighttime	httime Is your pet sleeping or resting in different places than normal?				
Pain	Is your pet is e	xhibiting increased panting, s	haking, or limping?		
	Is your pet isol	ating or hiding?			
	Has your pet's	body posture changed?			
	Does your pet	react differently when petted	?		
	Has your pet's	vocal behavior changed?			
		n disease process causing po			
	Does your pet	seem painful if they are able	to move?		
Energy	Does your pet	seem depressed or sad more	e often?		
	Does your pet	seem weak or feeble and uns	steady?		
	Is your pet rest	less or anxious more often th	nan normal?		
	Is your pet less	interested to go about their	daily routine?		
	Is your pet und	ible to play and go on walks?			
Time	Are the bad do	ys outnumbering the good d	ays?		
	ls your pet ask	ing for something that is uncl	ear?		
	Do you have c	oncerns about responding to	an emergency?		
	Do you strugg	e to manage daily medicatio	ns and care?		
S	Do you have c	oncerns about affording your	pet's medical care?		
	Does your pet	rely on you to move or carry	them?		
	Are you chang	ing your own sleep patterns t	o attend to your pet?		
Self	Do you feel ready?				