

Supplementary Appendix S1—Questionnaire used in the present study to assess attitudes of clients served by high-volume, stationary, nonprofit spay-neuter clinics.

1:1

Our clinic is taking part in a national survey to describe the animals and owners using spay/neuter clinics throughout the country. We are inviting you to participate by filling out this questionnaire. Your participation is very important as many people like you want to have their animals neutered but need clinics such as this one to help them do it. Your information will be kept strictly confidential and only summarized data from this survey will be used. Thank you very much.

1. What is the name of the animal you brought today? _____
2. This animal is a: Female Dog Female Cat
 Male Dog Male Cat
3. Age: _____ years _____ months (Best guess if unknown)
4. If this animal is a dog, is the dog a Pit Bull or a Pit Bull mix? YES NO I don't know
5. Is this the **first time** you have brought this animal to a veterinarian (not counting rabies clinics or other vaccination clinics)?
 YES NO I don't know
- 5a. If you answered **NO**, approximately how long ago did you bring the animal to the vet?
_____ years ago OR _____ months ago
6. How long have you had this animal? years _____ months _____
7. If this is a female, has she had any puppies or kittens? YES NO I don't know
- 7a. If yes, how many litters? _____ I don't know how many litters
8. Has this pet ever had a rabies vaccine before today? YES NO I don't know
9. What led you to choose to have your animal spayed or neutered now? Check ALL that apply.
 - Recently obtained this new animal
 - Just became old enough to have surgery
 - My veterinarian recommended it
 - To reduce behaviors like marking and roaming
 - Want to avoid having litters
 - Want to avoid having an animal in heat
 - Want to spay or neuter this animal before placing in a new home
 - Just learned about this clinic
 - Required to have animal neutered (by animal control, adoption contract, housing restrictions, or by law)
 - Want to help control animal overpopulation
 - Previously had an unplanned litter
 - Other, please describe: _____

PLEASE SEE NEXT PAGE TO FINISH



10. Why did you choose to bring your animal to this clinic, rather than a private practice veterinarian?
Check ALL that apply.

- This clinic was recommended to me by a friend, neighbor, or family member
- My veterinarian recommended this clinic
- I have used this clinic before
- Cost
- This clinic has a good reputation
- This clinic is closer or easier to get to than a private practice veterinarian
- I don't have a regular veterinarian
- I had a bad experience with a private practice veterinarian
- Just learned about this clinic
- I saw or heard advertisements for this clinic
- Other, please describe: _____

11. Your residential zip code: _____

12. Your gender: Female Male

13. Yearly household income (your answer can not be linked to you and is completely confidential):

- | | |
|--|---|
| <input type="checkbox"/> Under \$10,000 | <input type="checkbox"/> \$50,000 - \$59,999 |
| <input type="checkbox"/> \$10,000 - \$19,999 | <input type="checkbox"/> \$60,000 - \$69,999 |
| <input type="checkbox"/> \$20,000 - \$29,999 | <input type="checkbox"/> \$70,000 and above |
| <input type="checkbox"/> \$30,000 - \$39,999 | <input type="checkbox"/> Don't know |
| <input type="checkbox"/> \$40,000 - \$49,999 | <input type="checkbox"/> Prefer not to answer |

14. How many people (adults & children) **including yourself** are supported by this household income? _____

15. Are you a recipient of any state or federal assistance or benefit programs? Check ALL that apply.

- Medicaid
- Food Stamps
- WIC
- Housing Assistance (Section 8)
- Disability Benefits
- Unemployment Benefits
- Other, please describe: _____
- No, I am not a recipient of any government assistance or benefits.

16. How many total animals did you bring in today for neutering or spaying (including the one on this form)?

_____ puppies _____ adult dogs _____ kittens _____ adult cats

THANK YOU!