

Canine Behavior History Form

Carolina Veterinary Specialists

Voice: (336) 632-0605, Fax: (336) 632-0703

INSTRUCTIONS: Please fill out pages 1-7 giving as much relevant information as possible and bring it with you to the appointment. If the dog appears anxious when you leave the dog (separation anxiety) please also fill out page 8.

Date: _____ Recorder: _____

Who is your regular veterinarian:

Dr: _____

Clinic Name: _____

Address: _____

Telephone: _____

Client Name: _____

Address: _____

Name of the dog: _____

Breed: _____

Telephone: _____

Fax: _____

Age of dog now:

Age obtained:

Weight:

Sex:

Color:

Spayed/Neutered:

Age of neutering:

Reason for neutering:

Any behavioral changes following neutering?

Any medical problems?

Any current medications (please include dose if known)?

Behavior History - Canine**THE PROBLEM(S)**

WHAT IS PROBLEM 1? (please discuss in more detail in the section below)

Age of onset:

Duration of each incident:

Frequency of occurrence:

Have there been any changes in the pattern, frequency, intensity and/or length of incidents from the time of onset to the present?

Are there any specific conditions which seem to trigger the behavior?

Can the dog be interrupted when engaged in the behavior?

How long is the interval between the behavior stopping and the beginning of the next occurrence?

Describe any methods used to stop the behavior and the dog's response to these methods:

Please give a detailed description of the problem (continue on back of page, if necessary):

1. Most recent incident: (Date: _____)

2. Second last incident: (Date: _____)

3. Third last incident: (Date: _____)

Behavior History – Canine

WHAT IS PROBLEM 2 (if applicable)?

Age of onset:

Duration of each incident:

Frequency of occurrence:

Have there been any changes in the pattern, frequency, intensity and/or length of the incidents from the time of onset to the present?

Are there any specific conditions which trigger the behavior?

Can the dog be interrupted when engaged in the behavior?

How long is the interval between the behavior stopping and the beginning of the next occurrence?

Describe any methods used to stop the behavior and the dog's response to these methods:

Please give a detailed description of the problem (continue on back of page, if necessary):

1. Most recent incident: (Date: _____)

2. Second last incident: (Date: _____)

3. Third last incident: (Date: _____)

Behavior History – Canine**DOG'S HISTORY**

Where did you get the dog from:

At what age:

Do you know if the dog's parents or siblings engaged in similar behaviors or in any other abnormal behaviors?

List people living in the house with the dog, include children's ages:

List other animals in the household, their species, breed, age sex and whether or not they are neutered, please indicate which of these animals were living in the house when this dog was acquired:

Describe interactions between the animals in the household:

Describe interactions between the dog and family members:

How does the dog react to strangers?

Behavior of the dog in the veterinary office and during examination:

Does the dog live primarily inside or outside? Describe any restrictions to dog's movements inside the house/kennel etc:

Behavior History -- Canine**DAILY ACTIVITIES**

Please describe a typical 24 hour period in your dog's life, start with where and when the dog wakes up in the morning:

DIET

Type of food:

Frequency of feeding, and the amount fed:

Other food/treats/table scraps:

EXERCISE

On leash, include location:

Off leash, include location:

Time spent playing actively with owner. Describe activities which take place:

Time spent actively playing with other animals:

OBEDIENCE TRAINING

Have you attended obedience classes with your dog?:

Does your dog do the following willingly (circle where appropriate):

sit	stay	down	heel	come
stand for grooming		fetch	do tricks	

Situations in which your dog is less likely to obey you:

Does your dog work well for (circle where appropriate)?:

food	ball/frisbee/retrieve game	praise
petting	no reward	

Behavior History – Canine**INTERACTIVE BEHAVIOR**

Does your dog demand to be petted?

Does your dog ever seem irritated by or resent petting?

Does your dog bark excessively?

Does your dog cower or run away if people talk loudly or act boisterously?

Does your dog ever urinate or roll over on his/her back when greeting you?

Does your dog ever urinate or roll on his/her back when greeting strangers?

Does your dog urinate or roll on his/her back when greeting strange dogs?

Is your dog comfortable in crowds?

How does your dog act when strangers come to the house?

How does your dog act when he meets or passes strangers away from the house?

How does your dog act when he meets strange dogs?

1. When both are on the leash:
2. When both are off leash:
3. When he is leashed and other dog is free:

Is your dog frightened excessively by anything (circle)?

thunderstorms flies gunshots other (please specify)

Does your dog chase (circle)?

running children jogger bicyclist
cats or other furry animals cars

Does your dog urinate/defecate in the house?

Behavior History- Canine

Please check the appropriate box if your dog exhibits any of the listed behaviors at you or any member of the family does the following:

	Growl	Lift Lip	Snap	Bite	No Aggressive response	Not tried
Touch the dog's food while eating						
Walk past the dog while eating						
Add food while eating						
Take away real bone or rawhide (please circle)						
Walk by dog when s/he has real bone/rawhide						
Touch delicious food when dog is eating						
Take away a stolen object						
Physically wake dog up						
Physically disturb a resting dog						
Restrain dog when it wants to go someplace						
Lift dog						
Pet dog						
Medicate dog						
Handle dog's feet						
Trim the dog's toenails						
Groom dog						
Bathe or towel dog off						
Take off or put on collar						
Pull dog back by the collar or scruff						
Reach for or grab dog by collar						
Hold dog by muzzle						
Stare at the dog						
Visually threaten dog: newspaper or hand						
Hit the dog						
Walk by the dog in crate						
Walk by/talk to dog on furniture						
Remove dog from furniture: physically or verbally						
Make dog respond to command						

Does your dog get a glazed look in his/her eyes? _____

Does your dog have a Jeckyl and Hyde personality? _____

Do you consider your dog hyperactive? _____

Behavior History- Canine

Please complete this page if your dog has ever exhibited a problem behavior when left alone or appeared excessively anxious when you prepare to leave.

History	Yes	No	I don't know
Did you acquire dog after 3 months of age?			
Did you acquire dog at 5 weeks of age?			
Was your dog acquired at a shelter or pound?			
Has your dog had multiple owners in his/her life?			
Was your dog acquired from a pet shop?			
Was your puppy an orphan or hand raised?			
Was your dog the single puppy in a litter?			

Behavior	No	Mild	Moderate	Severe
Does your dog follow you around the house?				
Does your dog become upset/anxious when you put on your shoes?				
Does your dog become upset/anxious at the sound of your keys?				
Does your dog become aggressive when you leave?				
Does your dog bark or whine excessively within 30 minutes of your departure?				
After you leave, does your dog's activity decrease?				
After you leave, does your dog appear depressed?				
After you leave, does your dog have a loss of appetite?				
Only in your absence , does your dog destroy property?				
Only in your absence , does your dog urinate or defecate in your home?				
In your absence , does your dog regularly have diarrhea, vomit, or lick excessively?				
Does your dog exhibit excessive greeting on your return (jumping, hyperactivity, barking more than 2-3 minutes)?				