# Cochrane \& Area Humane Society Canine Behaviour Consultation History Questionnaire 

Please fill this document out in as much detail as possible. In order for us to properly assess your dog, we require this important information. Once the questionnaire is completed, our staff will contact you to set up a consultation.


## Scheduling a Consult

| What day of the | $\square$ Monday | $\square$ Tuesday | $\square$ Wednesday |
| :---: | :--- | :--- | :--- |
| week would work |  |  |  |
| best for you? | $\square$ Thursday | $\square$ Friday | $\square$ Saturday |
|  | $\square$ Sunday |  |  |

What time of the $\square$ Morning $\quad \square$ Afternoon $\square$ Evening day would work best for you?

Would you prefer an in-person consult at our Rehabilitation \&
 Education Centre or a Zoom (virtual) consult?

Do you have an $\square$ instructor preference?

## Background

Where did you
get your dog?
If your dog has been previously owned, why was the dog given up? How many previous homes?


Did you meet your dog's parents? If so, describe their behaviour.

If your dog has been spayed/neutered, how old were they when this happened?
$\square$
If your dog has not been spayed/neutered, have they been bred?
$\square$
If your dog is female, has she had any heat cycles? Age of first one? Any abnormal?

## Physical and Medical Issues

$\square$
Does your dog have any food allergies?

## Nutrition

What type of $\square$ food is your dog being fed?

What types of treats, cookies or chew items does your dog get, and how often?

How many times a day is your dog fed?

How many times a day is the dog fed?

Does your dog eat right away and finish the entire meal?

Where is your dog fed and who is nearby when he/she eats?

Who does the feeding?

Does your dog get 'people food' and if so at what location?

## Environment

Where does your dog sleep?

Is your dog allowed on the furniture?

Where does your dog eliminate?

Where is your dog kept when no one is home?

For what period of time, on average, is your dog left alone?

What percentage of time does your dog spend indoors versus outdoors?

What type of area do you live in?
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$
$\square$

## What type of <br> house do you live <br> in? (Apartment, <br> House w/ yard, farm, etc.)

## General Information

What would you most like to change about your dog's behaviour? Name at least three and in order of importance.
$\square$
Is your dog $\bigcirc$ Yes
housebroken?
O No
O Somewhat
Is your dog crate $\bigcirc$ Yes
trained? 〇 No
Somewhat

What type of $\square$ your dog receive and how often?

Can you describe a typical day in the life of your dog?

What is the favourite toy or game?

What is your dog's favorite treat? Can you name two others he/she enjoys?

What is your dog's favorite activity?

What is your $\square$ dog's least
favorite thing?

Can family members handle your dog physically? Bathe? Trim nails?


Do you plan to do any type of competition, dog sports or therapy related activities with your dog?
$\bigcirc$ Yes
○ No
〇 Maybe

How does your dog behave with familiar visitors?

How does your dog behave with unfamiliar visitors? $\square$

Where is your
dog when you
have visitors?


## Training

Has your dog had any previous training? If so, what type of training (group class, private class, etc.)?


How is your dog with sit?

How is your dog $\square$ with down?

How is your dog $\square$ with come?

How is your dog $\square$
with stay?
How is your dog $\square$ with heel?

How is your dog with drop it?
$\square$

How is your dog with leave it?

In what locations/ situations are the commands most successful?


In what locations/ situations are the commands least successful?


Have you ever used a head collar (gentle leader, etc.), anti-pull harness (easy walk, etc.) or any other training tool? If so, which ones?
$\square$
Describe your $\square$ dog's activity level
$\square$
I

What tricks does

$$
\Gamma
$$ your dog know?

Describe how you reprimand, correct or punish your dog for unwanted behaviour, and give an example of the circumstances under which you might do so.

Describe how you reward your dog for good behaviour. $\square$

## Who will be responsible for <br> training the dog? <br> Family/Relationships

$\square$

Please list each person living in the household including name, age (if child) and average time spent at home:

Describe how your dog gets along with each family member $\square$

List each animal living in the household including name, species, breed, sex, age obtained and age now:

Describe your dog's relationship with each animal

## Behaviour Concerns

Can you describe the behaviour?

What would you like your dog to do instead? $\square$

When did the behaviour first manifest?

Have you moved since obtaining your dog? If so, how many times?

Were there any changes in the household at the time the behaviour first manifested?

How often does the behaviour occur?
n what location does the behaviour occur?

Who is present when the behaviour occurs?
$\square$
$\square$
$\square$
$\square$
$\qquad$ $\square$

Has the frequency of the behaviour increased, decreased or remained the same?
$\square$
Has the intensity of the behaviour increased, decreased or remained the same?
$\square$
When was the most recent incident?


What prompted you to see help this time?


What training has been done so far to address the problem?


List any
techniques that had any success: $\square$
List any techniques that have made the problem worse:


How much time and effort are you willing to spend on resolving the issue?
$\square$

Have you considered the options should the issues not be solvable?

Can you offer any other information that might be helpful? $\square$

| Additional | $\square$ Barking |
| ---: | :--- |
| problems (check | $\square$ Chewing/licking self that apply) |
|  | $\square$ Destructive digging |
|  | $\square$ Destructive chewing |
|  | $\square$ Does not listen |
|  | $\square$ Escaping |
|  | $\square$ Excitable |
|  | $\square$ Fly chasing |
|  | $\square$ House soiling |
|  | $\square$ Jumps up |
|  | $\square$ In rooms not allowed |
|  | $\square$ Ingests non-edible objects |
|  | $\square$ Mounting |
|  | $\square$ On furniture not allowed on |
|  | $\square$ Overactive |
|  | $\square$ Phobias (thunder/cars/etc. |
|  | $\square$ Pushy/demanding |
|  | $\square$ Tail chasing |
|  | $\square$ Separation anxiety |
|  | $\square$ Shyness (non-aggressive) |
|  | $\square$ Sleep concerns |
|  | $\square$ Stool eating |
|  | $\square$ Submissive/excitement urination |
|  | $\square$ Urinating/defecating in kennel |
|  | $\square$ |

Describe briefly about the items you checked off and describe any other issues that were not listed

## Aggression/Reactivity

Please check all that apply regarding your dog's behaviour towards people/dogs/other animals:
$\square$ Aggressive responses are sudden and surprising
$\square$ Episodes appear unprovoked
$\square$ The dog is abruptly docile after an incident
$\square$ The dog appears sorry afterwards
$\square$ The dog appears disoriented afterwards
$\square$ The dog appears anxious before the incident
$\square$ The dog appears anxious after the incident
$\square$ The dog appears to have a 'glazed' or blank look after the incident
$\square$ I can usually tell what will set my dog off
$\square$ The behaviour is new and not typical of the dog
How old was your dog the first time they growled at a person/dog? Please specify if it was a person or dog.
$\square$
How old was your dog the first time they snapped or bit a person/dog? Please specify if it was a person or dog.

Has your dog ever bitten hard enough to break skin? If so, please list all incidents and explain the location of the bite and the severity.

List any type of
people your dog may react aggressively towards
(children,
strangers, man, etc.).

## Describe any

 other situations where your dog may react aggressively.When your dog is reacting, what is your response? $\square$
Does your dog act fearful at the time of the situation (tail down, ears back, cowering, etc.)?

Describe your dog's body language


Does your dog react aggressively in any of these situations (please check all that apply)
$\square$ Petted
$\square$ Hugged
$\square$ Lifted
$\square$ Bending over dog
$\square$ Reaching towards
$\square$ Staring at animal
$\square$ Leash restraint
$\square$ Collar restraint
$\square$ Scruff restraint
$\square$ Nail trimming
$\square$ Grooming
$\square$ Giving medication
$\square$ Called of furniture
$\square$ Forced off furniture
$\square$ Approached when sleeping
$\square$ Approached when eating
$\square$ Startled when sleeping
$\square$ Touched when eating
$\square$ Taking food away
$\square$ Taking treat/bones away
$\square$ Taking toys away
$\square$ Approached with toy
$\square$ Approached when with family member
$\square$ Person entering/leaving room
$\square$ Verbally punished
$\square$ Physically punished
$\square$ When obedience commands are given
$\square$ At vet clinic
$\square$ Toddlers/babies
$\square$ Unfamiliar adult entering yard/house
$\square$ Unfamiliar child entering yard/house
$\square$ Familiar adult entering yard/house
$\square$ Familiar child entering yard/house
$\square$ People walking by when dog in house
$\square$ People walking by when dog in car

List continued from previous page of dog reacting aggressively in any of these situations (please check all that apply)
$\square$ Stranger approaching owner (dog on leash)
$\square$ Stranger approaching owner (dog off leash)
$\square$ Other dogs while on leash
$\square$ Other dogs when off leash
For the above areas that are checked off, how does your dog react (growls, bares teeth, snaps, bites, etc.)?

