

Catalan Sheepdog Club of Great Britain – Breed Health Survey Form 2020

The Catalan Sheepdog Club of Great Britain would be grateful if you could take the time to complete the questionnaire below. It will take between 5 and 10 minutes to complete. The aim

of the survey is to enable the club to collect data to monitor and improve the health of Catalan Sheepdogs within the UK. Your help is greatly appreciated. By using this form you agree to the Catalan Sheepdog Club of Great Britain using the data you supply to inform their Health Plans and to provide reports on the health status of UK Catalans. All information sent to the Breed Health Co-ordinator will be treated in the strictest confidence and is for the sole use of the Catalan Sheepdog Club of GB, however statistics may be presented to the Kennel Club.

You may, if you wish, complete the form anonymously. Please answer all questions marked with an *.

Please complete one questionnaire for each Catalan Sheepdog you own.

Name:	Pet Name of Catalan Sheepdog: *
First line of your address:	
	KC Name of Catalan Sheepdog: *
Postcode:	Sire: *
Email:	Dam: *
Tel:	Dog or Bitch?: * Dog Bitch
Breeder:	Date of Birth: * Age of dog now: *
Colour: * 🗌 Fawn 🗍 Grey 🗐 Black (& Tan Sable Other - Please specify
Does your dog have double dew claws on the hind	I feet? * 🛛 Yes 🔍 No
Please list the name & type of vaccinations your C	atalan has been given. *
Were there any noticeble reactions to the vaccinations? If yes please give details, including age occurred: *	
Has your Catalan been breed from?: *	at the end of the questionnaire.
Has your Catalan been neutered? :*	
Health Checks Has your Catalan has it's eyes tested Yes under the BVA/KC scheme?: *	No Result if yes:
Have you had your Catalan's hips scored Under the BVA/KC scheme?: *	Yes No Result Left: Right:

Does your dog suffer from any of the following Conditions? *	ʻX' if Yes	Age (at onset of condition)	Other Details (if the condition re-occurs, type e.g. cancer, cataracts, euthanised due to condition, age at death etc.)
Aural (ears) – Deafness			
– Otitis			
– Ear Mites			
– Other			
Cancers/Tumors – Bone			
– Lung			
– Mammory			
– Ovarian			
– Skin			
– Stomach			
– Other			
Cardiac (heart) - Heart Murmur			
- Mitral Valve Disease			
- Other			
Cerebral Vascular - Stroke			
Dental - Dental Disease			
- Retained puppy teeth			
Dermatological (skin) – Alopecia			
– Dermatitus			
– Flea Allergy			
– Other			
Endocrine (hormone system)			
– Addison's			
– Cushing's			
– Diabetes			
– Other			
Gastrointestinal – Colitis			
 – Gastric Torsion (bloat) 			
 Irritable Bowel Disease 			
– Other			
Hepatic (liver) – Hepatitus			
– Pancreatitis			
– Other			
Immune System – Atopy			
 Auto-im mune Disease 			
Musculo-skeletal (bones, muscles, joints) – Arthritis			
– Elbow Dysplasia			
– Hip Dysplasia			
– Patella Luxation			
 – Undershot/Overshot Jaw 			
Neurological – Epilepsy			
– Other			
Ocular (eyes) – Blocked Tear Ducts			
– Cataracts (specify type)			
– Glaucoma			
– PRA			
Reproductive (female) – Difficulty Whelping			
– False Pregnancy			
– Failure to Conceive			
– Pyrometra			
Reproductive (male) – Infertility			
– Undescended Testicles (Chryptorchidism)			
Respiratory – Bronchitis			
– Kennel Cough			
– Pneumonia			
Urological – Cystitis			
– Other			

Behaviour and Temperament

If you would like to include this information, use the following boxes to describe your dog's temperament and behaviour. Please put an "X" in the column with the appropriate answers.

		Always	Often	Sometimes	Never
1	Reactive with Dogs				
2	Nervous/Fearful of People				
3	Submissive Urination (piddling)				
4	Noise/Thunderstorm Fear				
6	Separation Anxiety				
7	House-training Problems				
8	Outgoing/Friendly				
9	Excitable/Active				
10	Calm/Settles Easily				
11	Excessive/Persistent Barking				
12	Resource Guarding				
13	Aggressive with Dogs/People				

Please use the box below to give additional details of any condition listed above e.g. Any medication or to give details any other conditions not covered in the Health Survey.

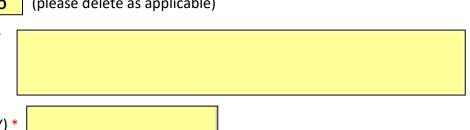
This section is on any dogs you have owned that have sadly passed away.

How old was your Catalan when he/she died?

Was your dog euthanised? YES / NO

(please delete as applicable)

Please give the reason your dog died/ was euthanised.



Date Survey Completed (DD/MM/YYYY) *

If you require additional forms, please contact Debbie Hansford (see below for contact details).

Please return the completed form to:

Debbie Hansford, Hazeldene, School Road, Lover, Salisbury, Wiltshire, SP5 2PW. Tel: 01725 510445.

Alternatively, email the completed survey to health@catalansheepdogclub.co.uk.

Supplemental Page – Please complete this page if you have bred from your Catalan and return it with the previous 3 pages. Thank you.

DOGS ONLY

If your Catalan has sired puppies, how many litters?	
How many puppies has your dog sired?	

BITCHES ONLY

Litter 1	No. of Live Puppies	No. of stillborn puppies		Total no. of puppies.
Please complete the following:				
Bitches only - Was it a natural wh	nelping? (delete as applical	ole)	YES / NO	
If there were any complications during whelping, please give details.				

<u>Litter 2</u>	No. of Live Puppies	No.	of stillborn puppies	Total no. of puppies.
Please complete the following:				
Bitches only - Was it a natural whelping? (delete as applicable)			YES / NO	
If there were any complications during whelping, please give details.				

Litter 3	No. of Live Puppies	No.	of stillborn puppies	Total no. of puppies.
Please complete the following:				
Bitches only - Was it a natural whelping? (delete as applicable)			YES / NO	
If there were any complications during whelping, please give details.				

<u>Litter 4</u>	No. of Live Puppies	No.	of stillborn puppies	Total no. of puppies.
Please complete the following:				
Bitches only - Was it a natural whelping? (delete as applicable)			YES / NO	
If there were any complications during whelping, please give details.				