



## Catalan Sheepdog Club of Great Britain – Breed Health Survey Form 2021

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:	<input type="text"/>	Pet Name of Catalan Sheepdog: *	<input type="text"/>
First line of your address:	<input type="text"/>	KC Name of Catalan Sheepdog: *	<input type="text"/>
Postcode:	<input type="text"/>	Sire: *	<input type="text"/>
Email:	<input type="text"/>	Dam: *	<input type="text"/>
Tel:	<input type="text"/>	Dog or Bitch?: *	<input type="checkbox"/> Dog <input type="checkbox"/> Bitch
Breeder:	<input type="text"/>	Date of Birth: *	<input type="text"/> Age of dog now: * <input type="text"/>
Colour: *	<input type="checkbox"/> Fawn <input type="checkbox"/> Grey <input type="checkbox"/> Black & Tan <input type="checkbox"/> Sable <input type="checkbox"/> Other - Please specify <input type="text"/>		
Does your dog have double dew claws on the hind feet? *	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please list the name & type of vaccinations your Catalan has been given. \*

Were there any noticeable reactions to the vaccinations? If yes please give details, including age occurred: \*

Has your Catalan been bred from?: \*

 Yes  No

If yes please fill in the supplemental page at the end of the questionnaire.

Has your Catalan been neutered? :\*

 Yes  No

### Health Checks

Has your Catalan has it's eyes tested under the BVA/KC scheme?: \*

 Yes  No

Result if yes:

Have you had your Catalan's hips scored under the BVA/KC scheme?: \*

 Yes  No

Result Left:

Right:

Please continue overleaf

Does your dog suffer from any of the following Conditions? *	'X' 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.)
<b>Aural (ears) – Deafness</b>			
– Otitis			
– Ear Mites			
– Other			
<b>Cancers/Tumors – Bone</b>			
– Lung			
– Mammary			
– Ovarian			
– Skin			
– Stomach			
– Other			
<b>Cardiac (heart) - Heart Murmur</b>			
- Mitral Valve Disease			
- Other			
<b>Cerebral Vascular - Stroke</b>			
<b>Dental - Dental Disease</b>			
- Retained puppy teeth			
<b>Dermatological (skin) – Alopecia</b>			
– Dermatitis			
– Flea Allergy			
– Other			
<b>Endocrine (hormone system)</b>			
– Addison's			
– Cushing's			
– Diabetes			
– Other			
<b>Gastrointestinal – Colitis</b>			
– Gastric Torsion (bloat)			
– Irritable Bowel Disease			
– Other			
<b>Hepatic (liver) – Hepatitis</b>			
– Pancreatitis			
– Other			
<b>Immune System – Atopy</b>			
– Auto-immune Disease			
<b>Musculo-skeletal (bones, muscles, joints)</b>			
– Arthritis			
– Elbow Dysplasia			
– Hip Dysplasia			
– Patella Luxation			
– Undershot/Overshot Jaw			
<b>Neurological – Epilepsy</b>			
– Other			
<b>Ocular (eyes) – Blocked Tear Ducts</b>			
– Cataracts (specify type)			
– Glaucoma			
– PRA			
<b>Reproductive (female) – Difficulty Whelping</b>			
– False Pregnancy			
– Failure to Conceive			
– Pyometra			
<b>Reproductive (male) – Infertility</b>			
– Undescended Testicles (Cryptorchidism)			
<b>Respiratory – Bronchitis</b>			
– Kennel Cough			
– Pneumonia			
<b>Urological – Cystitis</b>			
– Other			

Please continue overleaf

## 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](mailto: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**

<u>Litter 1</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.			

<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.			

<u>Litter 3</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.			

<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.			