**The Combined Griffon Clubs Health Questionnaire for dogs currently kept or who have died since 2004.**

**Our breed was last surveyed 10 years ago. The Breed clubs and Kennel Club feel it is time to have another questionnaire to monitor the current state of health in our breed.**

**All the information in this survey will be kept Anonymous.**

**If you wish also wish to keep the name and registration number of your dog anonymous then please leave this blank.**

Please tell us about all the Griffons you currently own. We need to know about **healthy** dogs as well as those who may be suffering from specific health conditions.

We are interested in Griffon of any age, colour and coat type whether they are:

1. Show dogs current or retired.
2. Dogs that are being bred from or have been bred from.
3. Pet, companion or rescue dogs.

**We need all the information we can get on as many dogs as possible to make this a worthwhile exercise.**

**As a little incentive each dog that is submitted to the breed health co-ordinators will be assigned a unique number that will be entered into a draw with the winner receiving £50.00.**

If you are not sure of the exact date(s) of health tests or anything else then please just use your best guess as the information will still be valuable to us.

If you have any difficulty with any of the questions or would like to speak to a breed health coordinator to help you with the survey then please feel free to give us a ring. We would be more then happy to help you and go through the survey with you.

Your breed health coordinators details:

# Jane Conway: Breed Health coordinator for the Griffon Breeders Association and Northern Griffon Bruxellois club.

Home: 01462 647202 email: jane@rconway.co.uk

Address: 7 The Avenue, Stotfold, Hitchin, Herts, SG54LY

# Jessica Gruninger: Breed health coordinator for the Griffon Bruxellois Club.

Home: 01707 644182 email: jessica.darkle@gmail.com

Address: 142 Auckland Road, Potters Bar, Herts, EN6 3HT

**Alexis Smith: Breed health coordinator for the Scottish Griffon Bruxellois Club**.

Home: 0141 778 4617 email: tantori@hotmail.co.uk

512 Edinburgh Rd, Glasgow, G33 3AH.

Extra printed copies are available on request from any of the Breed Health Coordinators or can be downloaded from any of the Griffon Club Websites at:

<http://thegriffonclub1897.co.uk/news.php>

<http://www.griffonbreeders.org.uk/>

<http://northerngriffon.co.uk/links.html>

Please print/photocopy the DOG DETAILS sheet for extra dogs.

**Please return your completed questionnaire(s) to any of the Breed Health coordinators, address’ above.**

Participants details (to be kept anonymous):

|  |  |  |  |
| --- | --- | --- | --- |
| Your Name | Address | Phone number | Number of dogs submitted. |
|  |  |  |  |

Please enter me into the prize draw: **Yes / No**

**…………………………………………………………………………………………………….**

Participants details (to be kept anonymous):

|  |  |  |  |
| --- | --- | --- | --- |
| Your Name | Address | Phone number | Number of dogs submitted. |
|  |  |  |  |

Please enter me into the prize draw: **Yes / No**

|  |
| --- |
| **DOG DETAILS** |
| Dog Number (for club use only)  |
| Date of birth:  |
| KC Reg. Name:  |
| Sex: M/F/M neut/F neut Colour: Coat type: |
| Please use the codes for “Disease” and “How diagnosed” from the final page of this survey. Tick “No disease” if this dog is healthy. |
| Disease:(code) | How diagnosed:(code) | Age of onset: |
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| Date of death, if applicable: |
| Cause of death: |  | **❑ No disease** |

|  |  |  |
| --- | --- | --- |
| **Health Test / Age at testing.** |  **Results** | **Comments****Date of test/s** |
| **KC/BVA CM/SM scan** | **CM Score:** | **SM Score:** | **a/b/c please circle** |  |
| **MRI Scanned non BVA** |  |  |  |  |
| **KC/BVA eye test** |  |  |
| **KC/BVA hip dysplasia**  | **Score LHS:** | **Score RHS:** |  |
| **Patella Score** | **Score LHS:** | **Score RHS:** |  |
| **Heart Testing.** |  |  |

|  |  |
| --- | --- |
| **Diet:** What do you feed and how often? |  |
| **Exercise:** How much exercise do you give your dogs daily is it on lead or off? |  |
| **Vaccination Status: How often do you vaccination, do you use homeopathy?** |  |
| **Medication:** Is your dog on any permanent medication. **Homeopathic remedies:** |  |

**Disease codes:**

**Please write the code for each disease the dog has suffered from in the relevant box above:**

|  |  |  |
| --- | --- | --- |
| **AURAL (EARS)*** 1. Deafness
	2. Otitis Externa (sore ears)

**CANCERS/TUMOURS**2.1 Lung2.2 Mammary2.3 Ovarian2.4 Skin2.5 Stomach2.6 Testicular2.7 Prostate2.8 Other (please state).**CARDIAC**3.1 Heart Murmur3.2 Mitral Valve Disease3.3 Sick Sinus Syndrome3.4 Other (please state)**CEREBRAL VASCULAR**4.1 Stroke | **DENTAL**5.1 Dental Disease5.2 Retained Puppy Teeth5.3 Incorrect bite.**DERMATOLOGIC**6.1 Alopecia6.2 Dermatitis6.3 Inter-digital Cysts6.4 Pyoderma 6.5 Skin fold pyoderma. i.e nose**ENDOCRINE**7.1 Addison’s7.2 Cushing’s7.3 Diabetes7.4 Hyperthyroidism7.5 Hypothyroidism7.6 Other- please state.**GASTROINTESTINAL**8.1 Colitis8.2 Irritable Bowel Disease8.3 Mega-oesophagus | **HAEMATOLOGY**9.1 Haemolytic Anaemia9.2 Platelet Abnormalities**HEPATIC**10.1 Chronic Liver Disease10.2 Hepatitis10.3 Pancreatitis10.4 Liver Shunt**IMMUNE SYSTEM**11.1 Atopy (itchy skin)11.2 Auto-immune Disease11.3 Flea Allergy  |
| **MUSCULO-SKELETAL**12.1 Arthritis12.2 Deformed leg/foot.12.3 Hip Dysplasia12.4 Lameness12.5 Patellar Luxation12.6 Other- please state.**NEUROLOGIC**13.1 Dementia/Senility13.2 Epilepsy13.3 Syringomyelia13.4 Narcolepsy13.5 Hydrocephalus13.6 Other –please state | **OCULAR**14.1 Blindness14.2 Blocked Tear Ducts14.3 Cataracts14.4 Distichiasis extras eye lashes in the wrong place14.5 Ectropion14.6 Entropion14.7 Glaucoma14.8 PRA14.9 SARDS14.10 Keratoconjunctivitis sicca (Dry Eye)14.11 Eye Ulcers.**REPRODUCTIVE – FEMALE**15.1 Dystocia (caesarians).15.2 Difficult to get in whelp15.3 Infertility15.4 Reabsorbed Puppies15.5 Pyometra15.6 Colourless Season15.7 Silent Season15.8 Has never come in Season but is not spayed. | **REPRODUCTIVE – MALE**16.1 Cryptorchidism, see below.16.2 Unilateral or bilateral .16.3 Monorchidism.16.4 Infertility16.5 Lack of libido.**RESPIRATORY**17.1 Bronchitis17.2 Kennel Cough17. 3 Pneumonia17.4 Brachycephalic obstructive airway syndrome (BOAS).17.5 Collapsed Trachea**UROLOGIC**18.1 Incontinence18.2 Cystitis18.3 Cystouroliths (Stones)18.4 Kidney Failure**MISCELLANEOUS**19.1 Death from old age19.2 Other conditions – please specify**HERNIAS**20.1 Umbilical Hernia20.2 Inguinal Hernia. |

**How the disease was diagnosed? Please enter the code in the relevant box above.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| D1 | D2 | D3 | D4 | D5 |
| By self | By breeder or other knowledgeable person | By vet | By second opinion | By lab test |

**Health Questionnaire for Breeders.**

**Bitches, please use one form for each bitch.**

Please give average figures or your best guess:

|  |  |  |  |
| --- | --- | --- | --- |
| At which day of the bitch’s Oestrus cycle do you start to mate? | At which day of the Oestrus cycle do you stop mating your bitch? | How many mating on average do you achieve? | At how many days Post coitus (from the last mating) are the puppies born? |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| What was your litter size?(number of puppies) | How many puppies were born dead? | How many puppies died within the first 3 weeks? | How many puppies survived to 8 weeks of age? | Was the litter:1. Born naturally 2. By Caesarian3. A combination of  both. |
| Litter#1 |  |  |  |  |  |
| Litter#2 |  |  |  |  |  |
| Litter#3  |  |  |  |  |  |
| Litter#4 |  |  |  |  |  |
| Litter#5 |  |  |  |  |  |
| Litter#6 |  |  |  |  |  |

**Puppy mortality and deformities. Please give the numbers affected.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Cleft Palate | Hare lip | Missing limbs | Hydrocephalus | Pectus excavatum (hollow chest) |
|  |  |  |  |  |
| Anasarca(water puppies) | Guts outside the body | Swimmer | Fading Puppy | Poor mothering |
|  |  |  |  |  |
| Other |  | Never lost a puppy.(Please state number bred). |  |

**Stud Dogs.**

**Please use one form for each stud dog.**

|  |  |  |
| --- | --- | --- |
|  |  | Comments |
| Age at first mating(years and months)(approx.) |  |  |
| Does you dog mate naturally without assistance. | Yes / No |  |
| If your dog needs assistance what do you do to help? |   |  |
| Can your dog only reproduce with AI | Yes / No |  |
| Number of missed pregnancies after a successful mating (approx.) |  |  |
| Age retired from breeding.(approx.) |  |  |
| Any other information you think might be of use and interest to the club: |