

# Liverpool Osteoarthritis in Dogs (LOAD)

# Owner questionnaire for dogs with mobility problems

Dear Owner,

Thank you for agreeing to complete this questionnaire.

Your assistance in this endeavour will enable us to gather valuable information about your pet, and is a vital component in our ongoing quest to combat painful and debilitating diseases such as arthritis. It is important that all questions are answered to the best of your ability and if you have a question regarding the questionnaire, please contact a health care member from your veterinary clinic. Thank you again for your help.

#### **Answering the questions**

Most of the questions are fairly simple. It is important that you only check one box per question except where otherwise requested (e.g. Question 4 under Lifestyle).

If you are in any doubt as to how to answer a particular question, please contact a member of staff for assistance.

Owner's name:				Pet's na	Pet's name:				
Owner's phone number:  Breed of pet:				Client number: Pet's age:			Today's date:		
	For office use only	Refer	ence limb:	LF 🔾	RF 🔿	LH 🔿	RHO	Reset	
Ba	ackground								
1.	How long has	s your pet b	een suffe	ring with	his/her mo	obility pro	oblem?		
O O Up to 6 months 6–12 months		12–24 r	12–24 months		O O O More than 36 months				
2.	Has your dog			suffering	from any	other pro	blems in a	ddition to his/	
	O No	O Yes	Please list the	ese if you can:					

3. If you can, please list any medications that your pet is currently receiving, stating when he/she received the last dose of each:

### **Initial Visit**

# Lifestyle

	In the last week, on average, how far has your dog exercised each day?							
$\circ$	0	0	0	0				
□ <b>1</b> km	1 - 2 km	2 - 3 km	3 - 4 km	More than 4 km				
2. In the last	week, on averaç	ge, how many	walks has your d	og had each day	?			
0	1	2	3	4	O more than 4			
3. What type	of exercise is th	nis?						
0	0	0	0	0				
Always on leash	Mostly on leash	Mostly off leash	Always off leash	Working				
Monday 7	Гuesday Wednesda	y Thursday	Friday Saturda	y Sunday	Reset			
5. On what s	ort of terrain do	es your dog m	ost often exercis	e?				
0	0	0	0	e?				
5. On what s On level grass	ort of terrain doc In woodland	es your dog m O On street	ost often exercis  O Over rough ground	e?				
On level grass	0	On street	0	e?				
On level grass	In woodland	On street	0	e?				
On level grass	In woodland	On street	0	e?				
On level grass  6. At exercis  Walk on leash	In woodland  se, how is your d	On street  og handled?  Orrot	Over rough ground  ORDING Run freely	e?				
On level grass  6. At exercis  Walk on leash	In woodland  Se, how is your d  Walk off leash	On street  og handled?  Orrot	Over rough ground  ORDING Run freely	e?				

### **Initial Visit**

# **Mobility**

Generally					
1. How is you					
0	$\circ$	0	0	0	
Very good	Good	Fair	Poor	Very poor	
2. How disabl	ed is your dog	by his/her lame	ness?		
0	$\circ$	0	0	0	
Not at all disabled	Slightly disabled	Moderately disabled	Severely disabled	Extremely disabled	
3. How active	is your dog?				
0	0	0	0	0	
Extremely active	Very active	Moderately active	Slightly active	Not at all active	
4. What is the	e effect of cold.	damp weather o	on your dog's la	imeness?	
		$\circ$	0	$\bigcirc$	
No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	
5. To what de 'lie down'?		r dog show stiffr	ness in the affe	cted leg after a	
0	0	0	0	0	
No stiffness	Mild stiffness	Moderate stiffness	Severe stiffness	Extreme stiffness	
At exercise					
6. At exercise	, how active is	your dog?			
6. At exercise	e, how active is	your dog?	0	0	
6. At exercise  C  Extremely active	e, how active is  O  Very active	your dog?  O  Fairly active	O Not very active	O Not at all active	
Extremely active	Very active	0	·	O Not at all active	
_	Very active	C Fairly active	·	O Not at all active	
Extremely active	Very active	C Fairly active	·	0	
Extremely active  7. How interested  Extremely interested	Very active  sted is your do  Very interested	Fairly active  og in exercising?	O Not very interested	0	
Extremely active  7. How interested  Extremely interested	Very active  sted is your do  Very interested	Fairly active  og in exercising?  Fairly interested	O Not very interested	0	

#### **Initial Visit**

					For office use only
9. What over	all effect does	exercise have on	your dog's lar	neness?	
O No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	
10. How often	does your dog	rest (stop/sit do	wn) during exe	rcise?	
O Never	Hardly ever	Occasionally	C Frequently	Very frequently	
11. What is th	e effect of cold	, damp weather o	on your pet's al	oility to exercise?	
O No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	
	egree does you following exerc	r dog show stiffn ise?	ess in the affe	cted leg after a	
O No stiffness	Mild stiffness	Moderate stiffness	Severe stiffness	Extreme stiffness	
<b>13.</b> What is th	e effect of your	· dog's lameness	on his/her abil	ity to exercise?	
O No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	

Thank you once again for completing this questionnaire.

Please return the form to a staff member.

### For office use only

Clicking LOAD Score will tabulate your score once.

Reset is not available for this function.

LOAD Score

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