

Reactivity Intake Form

Instructions: Please fill out this form as thoroughly as possible. Then use the Print to PDF feature to save your answers and email the completed form.

Note: Please complete the New Client Intake Form in addition to this form. This questionnaire will help me better understand your dog, your situation, and develop a behavior modification program that will improve your dog's behavior.

Medical History

Initial medical history questionnaire can be found in the **New Client Intake Form**.

Has your dog ever had a litter of puppies? Yes No

At what age was your dog fixed: _____

Did your dog's behavior change in anyway after being altered? Yes No

What changed? _____

List of current medications or supplements:

- _____
- _____
- _____
- _____

What brand and type of flea preventative? _____

Brand and type of heartworm preventative? _____

What side effects does your dog's medication have? _____

Overview

Describe the reason for your consultation today: _____

What do you want to accomplish with this consultation? _____

What about your dog's behavior concerns you the most? _____

What do you wish to accomplish with training? _____

Behavioral History

Early Life

What kind of environment was your dog raised in before 8 weeks old? _____

Where did you get your dog from? _____

How much interaction has the dog had with dogs during the first year of their life?

If you got your dog as a puppy, what kinds of places did you take him to before he was 4 months old?

If you got your dog as a puppy, what was his reaction to dogs when he was under 4 months old?

What pet stores, doggy day cares, vet clinics, groomers, or other pet facilities did you take him to before the age of 6 months old? _____

How old was your dog when you began noticing your dog's reactions towards other dogs? _____

Did your dog ever have a negative interaction with another dog as a puppy? If so, please describe the situation.

Home Environment

Does your dog listen to you inside your home? Yes No

Does your dog listen to you in your yard? Yes No

What behaviors does your dog know without hesitation while at home? (e.g. sit, stay, lay down, etc.)

Which of these does he/she without hesitation outside the home?

Where does your dog stay during the day when no one is at home?

How does your dog behave when you're getting ready to leave the house?

Is your dog destructive or a nuisance to neighbors in any way while you're away? Yes No

Does he react and/or bark at dogs while looking out the windows? Yes No

Do you play with your dog? Yes No

If so, what kinds of interactions or games do you play with him? _____

What are your dog's favorite toys? _____

Who in your family plays with your dog the most? _____

What do you do to reward your dog for good behavior?

What do you do to discourage undesirable behavior?

List rewards your dog absolutely loves (include food, treats, toys with specific brands, types, etc.):

- _____
- _____
- _____
- _____
- _____

Bite History

Has your dog ever made contact and/or bitten another dog? _____

Has your dog ever made contact and/or bitten a person? _____

*If your answer is yes to either question, please complete the **Bite History Questionnaire**.*

Other Dogs While Out & About On a Leash

On Leash

Does your dog pull on the leash? Yes No

What tools have you used to try to curb pulling?

Martingale Collar Prong Collar Choke Chain E-Collar Bark Collar

Citronella Collar/Spray Spray Water Bottle Clicker Extendible (Flexi) Leash

Waist Leash Front-Attach Harness No-Pull Harness Regular Harness Head Halti

Gentle Leader Others: _____

What is your response when you see another dog coming down the street?

What is your dog's response when he spots another dog 100+ yards away?

What is your dog's response when he spots another dog 50-100 yards away?

What is your dog's response when he spots another dog 20-50 yards away?

What is your dog's response when he spots another dog less than 20 yards away?

Distance that your dog does not react? _____

Types of dogs that bother him most? (Size? Breed? Color? Age?) _____

Has he ever met another dog **on** leash? If so, what happened? _____

Has he ever met another dog **off** leash? If so, what happened? _____

Other People

What is the dog's reaction to visitors in your home? _____

Describe your dog's reaction to children visiting: _____

Describe your dog's reaction to adult women visiting: _____

Describe your dog's reaction to adult men visiting: _____

Does your dog react to accessories such as canes, large coats, or hats? If so, what accessories?

What is the dog's reaction to adults while out and about on a leash? _____

Your dog's reaction to children while out and about on a leash? _____

What is the dog's reaction to people or children while off leash in an enclosed area outside of the home/yard?

Has your dog had any negative experiences with people in the past? If so, please describe:

Other Quirks

Does your dog have any odd or unusual behaviors inside the home?

Does your dog have any odd or unusual behaviors in your yard?

Does your dog have any odd or unusual behaviors outside your home or yard?

Other quirks your dog has: