



Observation Check List

	Y/N		Details
1		Spontaneous vocalisation for no apparent reason	
2		Quick look round to back/hind quarters for no apparent reason	
3		Hyperflexion of a limb as though stood on a thorn	
4		Reluctance/hesitation to sit and tendency to sit on tail base with hind legs extended	
5		Licking, biting, chewing, limbs, feet, tail base, back, groin, vulva, L6/L7/S1 dermatomes	
6		Hiding/not wanting to move at walk time and or stopping on walks	
7		Finding it difficult to relax/rest or decompress	
8		Difficulty squatting to defecate, adopts odd position/ walking forwards/moves around	
9		Fussy eating, frequent stomach upsets, grass eating, excessive drinking etc	
10		Pacing gait or any obvious lameness	
11		Skipping hindlimb gait or extending limb when sitting	
12		Deliberate placement of limbs when standing or walking	
13		Rolling about whilst on their back - wiggling about whilst on their back	
14		Excessive licking of the floor, their bedding etc	
15		Changes to coat pattern: direction changes, texture changes (dulling) etc	
16		Struggling or not being able to get onto furniture/jump in car etc	
17		Finds handling activities difficult - such as grooming, having harness on, being dried off etc	
18		Worse presentations of behaviours at certain times - for example in the evening/after exertion/after rest	

Web Address:

Email:

Tel No:

www.puddlehillpawsitivetherapy.com

puddlehilltherapy@gmail.com

07917802136