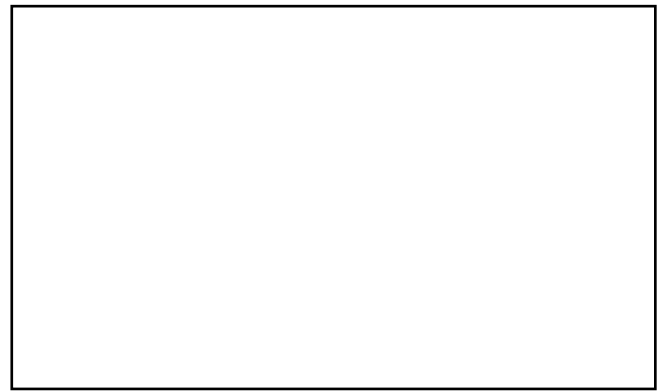




Date \_\_\_\_\_

Time \_\_\_\_\_



**Colorado State University  
Veterinary Medical Center  
Quality of Life Questionnaire**

|  |        |           |           |           |        |
|--|--------|-----------|-----------|-----------|--------|
| My dog is active   | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog is able to use stairs   | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog is able to run  | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog is able to walk   | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog sleeps comfortably  | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog has a good appetite   | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog is excited to see me  | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog seems contented   | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog urinates/defecates normally                                   | Always | Regularly | Sometimes | Rarely    | Never  |
| My dog seems irritable   | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog seems stiff or sore   | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog seems less willing to jump up on things (e.g. the bed or car) | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog has difficulty moving after a period of rest or exercise      | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog has a hard time getting comfortable                           | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog struggles to rise and/or lie down                             | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog licks his/her limbs   | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog pants excessively   | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog whines or cries   | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog avoids being touched  | Never  | Rarely    | Sometimes | Regularly | Always |
| My dog seems anxious   | Never  | Rarely    | Sometimes | Regularly | Always |

My dog's quality of life is:

Could not be worse 0 ----- 4 Could not be better

**Range of Motion Assessment**

\*The range of motion assessment is NOT intended to elicit pain; the examiner should refrain at the first sign of muscular resistance.

| Affected Joint    | R Shoulder | R Elbow | R Carpus | L Shoulder | L Elbow | L Carpus | R Hip | R Stifle | R Tarsus | L Hip | L Stifle | L Tarsus | Digits (specify): |
|-------------------|------------|---------|----------|------------|---------|----------|-------|----------|----------|-------|----------|----------|-------------------|
| Reduced Flexion   |            |         |          |            |         |          |       |          |          |       |          |          |                   |
| Reduced Extension |            |         |          |            |         |          |       |          |          |       |          |          |                   |
| Pain on Palpation |            |         |          |            |         |          |       |          |          |       |          |          |                   |

| Spinal mechanics      | O-A | C1 | C2 | C3 | C4 | C5 | C6 | C7 | T1 | T2 | T3 | T4 | T5 | T6 | T7 | T8 | T9 | T10 | T11 | T12 | T13 | L1 | L2 | L3 | L4 | L5 | L6 | L7 | LS | S-Cd | Tail |
|-----------------------|-----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|-----|-----|----|----|----|----|----|----|----|----|------|------|
| Reduced Flexion       |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Reduced Extension     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Reduced Sidebending R |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Reduced Sidebending L |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Kyphosis              |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Lordosis              |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Tenderness            |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Warmth                |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Muscle Tension        |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Atrophy               |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |
| Weakness              |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |     |     |     |    |    |    |    |    |    |    |    |      |      |