



GSD Health Profile Report

Please complete and lodge this form electronically using the SUBMIT option at the end. If you do not have access to EMAIL you can save the form to your computer to complete or print a copy of the form and hand write. Hard copies can be posted to

*Dr Candy Baker, Chair Breed Health & Welfare Committee,
PO Box 433, SERPENTINE WA 6125*

DATA COLLECTION NOTICE: The German Shepherd Dog Council of Australia collects data regarding animals, bloodlines and health conditions. The data collected will only be used when numbers are statistically viable on the condition that has been reported. The individual animal will not be named, however the data collected will be analysed and if significant numbers are identified with close bloodline ties, the bloodlines in common may be named as lines not to double up on, that is, used as general breeding advice.

Animal and Owner Information

If the dog is yet to be registered with the Canine Control please insert KENNEL PREFIX followed by UNNAMED PUPPY in the Registered Name of Dog field.

Registered Name of Dog:

Sex: M F

Registration No: *(if not yet registered please show 000)*:

Date of Birth:

Microchip No:

Tattoo No:

Pedigree Information

Sire:

Paternal Grand Sire:

Paternal Grand Dam:

Dam:

Maternal Grand Sire:

Maternal Grand Dam:

Owner/Breeder Details

I/we are the

Name:

Address:

Suburb:

Home Telephone:

Owners Email:

I hereby declare that by submitting this form:

- The particulars above are correct and related to the dog being reported.
- I give permission that the data will be used for statistical purposes only, which may then be published at a later date.
- I understand that this is a research program to improve the health of the German Shepherd Dog in Australia.
- That all information provided is accurate to the best of my (our) knowledge.

Diagnosis of Dog

The following information is required so that data can be analysed effectively. Please tick the boxes relevant to your dogs diagnosis.

Bone & Joint

Hip Dysplasia (HD)
Elbow Dysplasia (ED)
Ununited Anconeal Process (UAP)
Panosteitis
Hypertrophic Osteodystrophy (HOD)
Cauda Equina
Spondylitis
Diskospondylitis
Chondrodysplasia
Other

Gastro-intestinal (Digestive)

Wheat (Gluten) Allergies
Exocrine Pancreatic Insufficiency
Pancreatic Atrophy
Inflammatory Bowel Disease
Eosinophilic Enteritis
Chronic Colitis (Lymphocytic-Plasmacytic)
Other

Systemic

Aspergilosis
Hypothyroid – Thyroid Insufficiency
Seborrhea
Calcinosis Circumscripta

Other

Cancers

Haemangiosarcoma
Skin Haemangiosarcoma
Malignant Haemangio-Endothelioma
Lymphosarcoma
Mammary Gland Tumours
Other

Ears

Otitis Externa
Other

Eyes

Pannus (Chronic Superficial Keratitis)
Plasmoma
Other

Renal

Renal Dysplasia
Other

Dentition: Give details of dentition problem(s) with the animal

Muscular

Fibromyositis of the Gracillus Muscle
Other

Intestinal

Mesenteric Torsion
Mega-Oesophagus (Congenital)
Mega-Oesophagus (Acquired)
Canine Bloat (Bloat or Gastric Dilation & Volvulus)
Persistent Right Aortic Arch
Other

Heart

Patent Ductus Arteriosis (PDA)
Persistent Right Aortic Arch (PRAA)
Atrio-ventricular Valve Dysplasia (AVD)
Cardiomyopathy
Aortic Stenosis (SAS)
Other

Neurological

Epilepsy
Tail Chasing
Degenerative Myelopathy
Other

Blood

Haemophilia A
von Willebrands Disease (vWD)
Other

Liver

Porto-systemic Shunt (intra hepatic or extra hepatic)
Idiopathic Hepatic Fibrosis
Other

Hormonal

Pituitary Dwarfism
Other

Skin

Collagen Disorders of the Footpads
Deep Staph Pyoderma (Furunculosis/Folliculitis/Cellulitis)
Acanthosis Nigricans Systemic
Lupus Erythematosus
Dyscoid Lupus Erythematosus
Nasal Keratitis
Pemphigus
Perianal Fistula (Anal Furunculosis)
Other

Other (Please include the name of the health issue:

Was the dog diagnosed by a Veterinarian? Yes No

Diagnosis of dogs condition:

Date of examination:

Age of dog at time of diagnosis:

Condition was confirmed by the following tests/radiographs:

Present condition of the dog (undergoing treatment, condition resolved etc; or dog euthanaised):

Supporting documentation

Via Email – after the form has been submitted on completion an email message will open with this form attached. Please scan any reports and attach to this email along with any xrays that are available.

Via Mail – Include any relevant documentation and post to the address at the top of this form.

Veterinary Surgeon

Please include full details of the diagnosing Veterinarian as further information may be required.

Name of Veterinarian

Practice Name:

Address:

Suburb:

State:

Postcode:

Telephone:

Veterinarian Email:

Please save this form to your computer, then attach to an email and send to the GSDCA Breed Health & Welfare Committee. Email to gsdhealth@gsdcouncilaustralia.org