

TOTAL NUMBER OF LOWCHEN OWNED IN PAST 10 YEARS ____ MALE ____ FEMALE

Has any Lowchen owned by you in the past 10 years ever been diagnosed with any of the following health issues?

For each section you answer with a yes, please fill out the rest of the section. If you answer no to any section, skip to the next section. Please use the comment line to list death due to condition, onset age, symptoms etc.

Eye Disorders Yes No

- Distichiasis# Affected ____ M/F ____ Comment _____
- Dry Eye# Affected ____ M/F ____ Comment _____
- Entropion # Affected ____ M/F ____ Comment _____
- Juvenile Cataracts# Affected ____ M/F ____ Comment _____
- Progressive Retinal Atrophy.....# Affected ____ M/F ____ Comment _____
- Retinal Dysplasia..... # Affected ____ M/F ____ Comment _____
- Persistent Pupillary Membrane...# Affected ____ M/F ____ Comment _____
- Glaucoma.....# Affected ____ M/F ____ Comment _____
- Other _____.# Affected ____ M/F ____ Comment _____

Ear Disorders Yes No

- Chronic ear infection.....# Affected ____ M/F ____ Comment _____
- Deafness (if yes, describe coat color/pattern)# Affected ____ M/F ____ Comment _____
- Other _____.# Affected ____ M/F ____ Comment _____

Skin Disorders Yes No

- Atopic Dermatitis (allergy to inhaled substances)# Affected ____ M/F ____ Comment _____
- Food/Medicine Allergies.....# Affected ____ M/F ____ Comment _____
- Alopecia.....# Affected ____ M/F ____ Comment _____
- Autoimmune Skin Disease.....# Affected ____ M/F ____ Comment _____
- Systemic Demodectic Mange ..#Affected ____ M/F ____ Comment _____
- Seborrhea.....# Affected ____ M/F ____ Comment _____
- Other _____.# Affected ____ M/F ____ Comment _____

Gastrointestinal Disorders Yes No

- Pyloric Stenosis.....# Affected ____ M/F ____ Comment _____
- Megaesophagus.....# Affected ____ M/F ____ Comment _____
- Cleft Palate.....# Affected ____ M/F ____ Comment _____
- Chronic Vomiting.....# Affected ____ M/F ____ Comment _____
- Choric Colitis.....# Affected ____ M/F ____ Comment _____
- Inflammatory Bowel Disease.. # Affected ____ M/F ____ Comment _____
- Other _____.# Affected ____ M/F ____ Comment _____

Respiratory Disorders Yes No

- Congenital Tracheal Stenosis (narrow trachea)# Affected ____ M/F ____ Comment _____
- Stenotic Nares.....# Affected ____ M/F ____ Comment _____
- Elongated Soft Palate.....# Affected ____ M/F ____ Comment _____
- Laryngeal Paralysis.....# Affected ____ M/F ____ Comment _____
- Other _____.# Affected ____ M/F ____ Comment _____

Orthopedic Disorders Yes No

- Hip Dysplasia.....# Affected ____ M/F ____ Comment _____
- Patellar Luxation..... # Affected ____ M/F ____ Comment _____
- Elbow Dysplasia.....# Affected ____ M/F ____ Comment _____
- Premature IVD (intervertebral disc degeneration) # Affected ____ M/F ____ Comment _____
- Vertebral Anomalies.....# Affected ____ M/F ____ Comment _____
- HOD.....# Affected ____ M/F ____ Comment _____
- Other _____.# Affected ____ M/F ____ Comment _____

Cardiac Disorders

Yes No

- Vascular Ring
(right aortic arch)# Affected ___ M/F ___ Comment _____
- Subaortic Stenosis.....# Affected ___ M/F ___ Comment _____
- Pulmonic Valve Stenosis.....# Affected ___ M/F ___ Comment _____
- Persistent Ductus Arteriosus....# Affected ___ M/F ___ Comment _____
- Persistent Foramen Oval.....# Affected ___ M/F ___ Comment _____
- Mitral Valve Defect.....# Affected ___ M/F ___ Comment _____
- Cardiomyopathy.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____

Urinary Disorders

Yes No

- Ectopic Ureter.....# Affected ___ M/F ___ Comment _____
- Urinary Crystals / Stones.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____

Blood/Lymph Disorders

Yes No

- Autoimmune Hemolytic
Anemia.....# Affected ___ M/F ___ Comment _____
- Hemophilia (Type A or B)# Affected ___ M/F ___ Comment _____
- Idiopathic
Thrombocytopenia.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____

Endocrine Disorders

Yes No

- Hypothyroid.....# Affected ___ M/F ___ Comment _____
- Addison's disease
(adrenal insufficiency)# Affected ___ M/F ___ Comment _____
- Cushing's disease
(adrenal oversecretion)# Affected ___ M/F ___ Comment _____
- Diabetes.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____

Reproductive Disorders

Yes No

- Cryptorchid/Monorchid.....# Affected ___ M/F ___ Comment _____
- Abnormal Sperm.....# Affected ___ M/F ___ Comment _____
- Testicular Atrophy.....# Affected ___ M/F ___ Comment _____
- Irregular heat cycle.....# Affected ___ M/F ___ Comment _____
- Uterine Inertia.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____

Neurologic Disorders

Yes No

- Epilepsy.....# Affected ___ M/F ___ Comment _____
- Caudea Equina Syndrome.....# Affected ___ M/F ___ Comment _____
- Degenerative Myelopathy.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____

Cancer/Tumors

Yes No

- Mast cell tumor.....# Affected ___ M/F ___ Comment _____
- Lymphoma.....# Affected ___ M/F ___ Comment _____
- Hemangiosarcoma.....# Affected ___ M/F ___ Comment _____
- Testicular cancer.....# Affected ___ M/F ___ Comment _____
- Mammary cancer.....# Affected ___ M/F ___ Comment _____
- Osteosarcoma.....# Affected ___ M/F ___ Comment _____
- Other _____# Affected ___ M/F ___ Comment _____