

**MALE DOG HISTORY FOR REPRODUCTIVE EVALUATION**

Owner's name \_\_\_\_\_ Dog's name \_\_\_\_\_

Age of dog \_\_\_\_\_ Breed \_\_\_\_\_

Reason for evaluation \_\_\_\_\_

**I. Reproductive history:**

1. Has dog been used for breeding before?    Y    N  
If yes, dates of last breeding(s) \_\_\_\_\_ litter produced?    Y    N    # pups \_\_\_\_\_  
\_\_\_\_\_ litter produced?    Y    N    # pups \_\_\_\_\_  
\_\_\_\_\_ litter produced?    Y    N    # pups \_\_\_\_\_

2. How often is dog used for stud purposes? \_\_\_\_\_

3. Has the dog ever been manually collected?    Y    N    Easily?    Y    N    Painful?    Y    N

4. Date of last Brucellosis test \_\_\_\_\_ result \_\_\_\_\_ (Please bring a copy if done past 6 months)

5. Infertile relatives? \_\_\_\_\_

6. Has he ever had a semen evaluation before?    Y    N    (If yes, please bring copies of results)

**II. General health history:**

1. Most recent vaccine/ titer dates: DHPP \_\_\_\_\_ Rabies \_\_\_\_\_ Bordetella \_\_\_\_\_ Lymes \_\_\_\_\_ Lepto \_\_\_\_\_

2. Most recent worming date: \_\_\_\_\_ Product used: \_\_\_\_\_

3. Has the dog ever had a bladder infection?    Y    N

4. Does he ever strain to urinate or have blood in his urine?    Y    N

5. Does he ever drip blood from his penis on the floor NOT associated with urination?    Y    N

6. Are his stools thinner and/or more ribbon-like than they used to be?    Y    N

7. Has he ever been diagnosed with prostate disease?    Y    N

8. Has he ever had his prostate ultrasounded?    Y    N    (If yes, please bring copies of results)

9. Has he had a general blood workup including thyroid, heartworm test, and urinalysis the past 6 months?    Y    N    (If yes, please bring copies of results)

10. Has he had a fecal sample done the past year?    Y    N    Result \_\_\_\_\_

11. Any major illnesses, injuries, or problems (and dates)? \_\_\_\_\_

**III. Environment and housing:**

1. Is the dog housed indoors?    Y    N    Is he on concrete outside?    Y    N

2. Is he housed outdoors?    Y    N    On concrete?    Y    N    Heated kennels?    Y    N

3. Is he a show dog that is exposed to hot air blow drying frequently?    Y    N

4. Is he housed with intact bitches?    Y    N

5. Any new stresses (e.g. new animals, new owners, etc.)? \_\_\_\_\_

6. Is he exposed to cold water (e.g. hunting dogs retrieving in freezing ponds)?    Y    N

7. What is his diet? \_\_\_\_\_

**IV. Drugs and supplements:**

1. Is the dog exposed to any estrogens used by anyone in the household? (e.g. estrogen creams)    Y    N

2. What do you use for heartworm prevention? \_\_\_\_\_ flea control? \_\_\_\_\_

3. Please **list all medications and/or supplements (including dosages) you give your dog currently or have given him in the past year:** \_\_\_\_\_