



Liverpool Osteoarthritis in Dogs (LOAD)

Owner questionnaire for dogs with mobility problems

Thank you for completing this questionnaire. By doing so, you are providing us with valuable information about your pet. This will help us better evaluate their joint health to determine the best course of action to help them live a healthier, happier life.

Please answer <u>all questions</u> to the best of your ability. Select only one answer per question unless otherwise requested. If you have any questions, please ask a member of our hospital staff.

You	r information										
Owner's name:				Pet's name:			Today's date:				
F	or office use o	only Refe	erence limb:	LF 🔿	RF 🔿	LH O	RH 🔘	Reset			
Gei	nerally							For office			
1. How is your dog's mobility in general?											
,	O Very good	O Good	O Fair		O Poor		O Very poor				
2. How disabled is your dog by his/her lameness?											
Not	O at all disabled	O Slightly disabled	Moderately o	disabled	Severely disa	abled	O Extremely disabled				
3.	How active is	s your dog?									
Ext	O remely active	O Very active	O Moderately	active	Slightly ac	tive	O Not at all active				
4.	What is the e	?									
	O No effect	O Mild effect	Moderate	effect	O Severe eff	ect	Extreme effect				
5 .	To what degree does your dog show stiffness in the affected leg after a 'lie down'?										
N	O No stiffness	O Mild stiffness	O Moderate st	iffness	Severe stiff	ness	O Extreme stiffness				



At exercise					For office use only
6. At exercise,	how active is yo	our dog?			
0	0	0	0	0	
Extremely active	Very active	Fairly active	Not very active	Not at all active	
7. How keen t	o exercise is you	r dog?			
0	0	0	0	0	
Extremely keen	Very keen	Fairly keen	Not very keen	Not at all keen	
8. How would	vou rate vour de	og's ability to exerc	ise?		
0	0		0	0	
Very good	Good	Fair	Poor	Very poor	
Q What overa	Il offact door ove	ercise have on your	dogʻa lamonoss?		
7. Wildi överd		Cise flave off your	O O		
No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	
No effect	Will effect	Moderate effect	Jevere effect	Extreme effect	
10. How often	does your dog re	st (stop / sit down)	during exercise?		
0	0	0	0	0	
Never	Hardly ever	Occasionally	Frequently	Very frequently	
11. What is the	effect of cold, de	amp weather on yo	our pet's ability to	exercise?	
0	0	. 0	. 0	0	
No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	
12. To what dec	gree does your d	og show stiffness i	n the affected leg	ı after	
	' following exerc				
0	0	0	0	0	
No stiffness	Mild stiffness	Moderate stiffness	Severe stiffness	Extreme stiffness	
13. What is the	effect of your do	ogʻs lameness on hi	s/her ability to ex	xercise?	
0	Ö	0	0	0	
No effect	Mild effect	Moderate effect	Severe effect	Extreme effect	

Thank you once again for completing this questionnaire.

Please return the form to a staff member. If you completed the form electronically, please save it and email it back to the hospital.

For office use only

Manually insert the scores (0-4, from left to right) corresponding to each selected answer in the right-hand box. Scores are added together and the total is inserted in the final box at the bottom of the questionnaire.

LOAD Score

For electronic use, clicking the "LOAD Score" button will tabulate the score once. Reset is not available for this function.



