## ASHGI Cancer Database

ASHGI continues to gather data on cancer in Australian Shepherd in order to assit research and educate the breed community about these diseases. Please provide us with information on your dog. Please mail the completed questionnaire to:  ASHGI  1338 Trouville Ave.  Grover Beach, CA 93433  Or e-mail to:  51ca@ashgi.org				
What is the dog's call name?				
What is the dog's date of birth?				
What is the dog's registered name (if more than one, list all)?				
Please provide the dog's registration number(s) and the registry(ies) with which it is registered:				
What were the dog's occupation(s) pet show dog performance events stockdog search & rescue  Other-( describe)				
What is the dog's gender? M F				
If altered, how old was it at the time?				

What was the dog's primary coat color?  Blue Merle Red Merle Black Red (Liver)
Other (describe):
What trim color(s) does the dog have? White Tan(copper) White and Tan (copper) None
Please list the dog's sire and dam, registered name(s), registy(ies) and registration number(s), if known.
Are either sire or dam deceased? Please give date of death (aproximate) and cause, if known.
If either parent died of or was euthanized because of cancer, do you know the specific type?

Which of the following cancers did your dog have?
Lymphoma
Lymphosarcoma
Hemangiosarcoma
Mammary
Soft tissue carcinoma
Mast Cell
Melanoma
Leukemia
Osteosarcoma
Squamous cell carcinoma
Basal cell
Other:
When (date or age of dog) was the cancer discovered?
If the dog had hemangiosarcoma, was the primary tumor in the:
spleen
heart
spleen & heart
skin
unknown
Other:
Did the cancer metastasize? If so, what organs/body parts were affected?
Is the dog still living? Y N If no, was cancer the cause of death (including euthanasia because of the cancer)? Y N
If no, date of death?
What treatments were given for the cancer?

1	cancer go into remission? Y N f yes, what was the outcome? (Did dog remain cancer-free or did this or another cancer happen later?)
	dog have any other health conditions? Y N f so, what: conditions?
	e dog taking medication for other health conditions? Y N f so, what were they?
	re willing to provide it, what is the contact info for the diagnosing & veterinarians?
request (	you be willing to provide documentation of treatment/illness history upon ? Y N If you are willing, you may send copies with this questionnaire, if convenient.)
Where	was the dog living at time of diagnosis (city/state)?
- }	How long had it lived there at the time of diagnosis?

If the dog is still living, is it still at this location? Y N
If not, where does it live?
Was the dog born here? Y N
If no, where was it born (city/state)?
What was the nature of the region where the dog was living at time of diagnosis?  urban suburban agricultural wild lands
Other
How long had the dog been living there at time of diagnosis?  If the dog is still living, is it still at this location? Y N  If not, where does it live now? (city/state)
What was the primary source of the dog's water supply at the time the cancer was diagnosed? city well surface bottled
Oother:
What was the dogs diet at the time of diagnosis? (list all that apply)  commercial dry  commercial canned  raw
Other:
How long had the dog been on this diet?

Were other diets provided prior to the cancer? If so, what type?		
	_	
	_	
Were flea, tick or heartworm medications used on the dog?YN Please list type and brand names (i.e. Flea dip/Acme Pet Products.)	_	
How frequently were these products used?		
Were flea/tick preparations used in the kennel, yard or other dog living areas?  Y N		
Please list type and brand names (i.e. aerosol bomb/Kill-All.)		
What type of housing did the dog live in? (note all that apply)		
outdoor kennel indoor kennel indoor/outdoor kennel inside home open yard enclosed yard		
Other-describe:		

Did the dog's occupation or place of residence expose it to any of the following:  chemical plants  high-tension power lines  chemical or petroleum storage facilities  agricultural runoff  agricultural or urban chemical spraying programs  freeway or major airport within one mile	
Other-describe:	
If your dog had lymphoma and was exposed to urban or agricultural spraying programs, please answer the following:	
Were the exposures: Agricultural Urban	
. When and how often was the dog exposed?	
Can you provide the chemicals used or the reason(s) for the spraying?	_
Did you and your dog participate in any clinical research on this cancer? Y N	
If so, please give the name of the institution conducting the research, the name of the researcher (if known) and a brief description of the project.	
	_ _
	_
	_ _
	_
Is your dog's DNA on file with any long-term storage program?YY	N

Canine Health Information Center (CHIC)				
ASCA Gene Bank University of Missouri "Phenome Project"				
Other:				
May we have your contact information?				
Name:				
Address:				
Phone:				
Fax:				
E-mail				

Thank you for submitting this information to our database. We know how devastating these cancers can be to both the dogs and the people who love them. The information you provide will help us in our effort to find preventions and cures for these diseases.

If you have questions, please feel free to contact us:

Phone: 559 485-3126 E-mail: 51ca@ashgi.org

Please feel free to offer additional comments or attach information you feel is pertinent.