



Equine Behavioural Questionnaire

Client Details

Client Name:

Address:

Email:

Phone:

Patient Details

Horses Name:

Breed:

Age (DOB):

Gender:

Neuter Status:

Height (Hands or cm):

Age obtained:

Date obtained:

Source (obtained from):

What has been your reason for owning/purchase of this horse? Leisure or Competition?

Please list the names, ages and occupations of the people that care for your horse:

Name	Age	Gender	Relationship with horse in question

Do you have any other horses? If so, please list and describe sex, age and breed:

Does your horse have any known previous history of behavioural issues?



Equine Behavioural Questionnaire

Is there any relevant previous veterinary/injury history?

What is your horse's lifestyle like? For example, stabled, kept out, how many in a field?

What is your daily feeding regime? What do you feed? Does this change depending on the season?

If you ride, what tack do you use? Please include anything you may apply for certain disciplines.

Which vet practice is your horse registered with?

When was the most recent equine dentist visit?

When was the most recent back and saddle check?

Is your horse shod? How frequently? How is your horse with your farrier?



Equine Behavioural Questionnaire

What type of headcollar do you use?

In your own words, please describe the main problem(s) in your horse's behaviour:

When was the first incident? Please describe it in detail:

Please describe two more occasions and what you think may have been happening at the time:

1.

2.

What do you think the triggers are for these behavioural issues? Why do you think your horse displays this behaviour?

Have there been previous attempts to rectify the situation? If so, what methods have been used?



Equine Behavioural Questionnaire

Does your horse display any other unwanted behaviours?

What outcome would you ideally achieve from a referral behavioural consultation?

Realistically, how many hours do you feel you spend directly with your horse per week, for example, during play, training, exercising, relaxing together, quality time together?

Has euthanasia been considered for your horse?

Do you agree to the [Terms and Conditions](https://donovanvetbehaviour.com/terms-conditions/)? (<https://donovanvetbehaviour.com/terms-conditions/>)

I have read and agree to the Terms and Conditions

Thank you for taking the time to complete this form. Please send it and any relevant information to: info@donovanvetbehaviour.com

On receipt of your questionnaire, we will contact you regarding payment and any additional information required.

Please note that all consultations are on the basis that a veterinary referral is obtained, access to veterinary records are given and a copy of the vet report will be sent to your vet upon completion. This form should be completed by the owner or someone with full permission to provide information and authorities.



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