Cranial cruciate ligament disease (CCLD) is an important cause of orthopedic problems in large breed dogs. The goal of this survey is to collect data to determine the prevalence of cranial cruciate ligament disease (CCLD) in field retrievers and to quantify the impact it has on the community. To do this we are going to collect data on as many AKC registered retrievers as possible that are involved in field work, both those that are affected and those that are not. That way we can get an accurate representative sample and determine how many are affected when compared to the overall population. Therefore, it is very important that you enter information about your retrievers even if you have never had one affected with cranial cruciate ligament disease (CCLD).

This survey is voluntary, and if you agree to participate you will be presented with a varied number of questions, depending on how many dogs you have, on your experiences with cranial cruciate ligament disease (CCLD), and the thoughts you may have about this issue. Since participation is voluntary you are free to skip any questions you do not wish to complete.

The results of this study will be collected and analyzed to be communicated back to this community as well as to be submitted for publication. They may also be used in presentations and development of educational materials.

The benefits to completing this survey include the gathering of valuable information about the prevalence and effects of cranial cruciate ligament disease (CCLD) on retrievers working in the field and its potential impact on all involved. Information gained from this specific group of dogs and handlers will lead to better sport specific decision making and tailored prevention and treatment plans. No matter what field events you participate in with your dog, your input on cranial cruciate ligament disease (CCLD) is valuable and will help offer new insight into the impacts of this disease.
If you have any questions regarding the nature of this study feel free to contact the investigator, Dr. Sarah Shull (shulldvm@msu.edu). If you have any questions regarding your rights as a research participant do not hesitate to call the MSU Institutional Review Board at 517-355-2180.

Thank you for your participation!
By clicking the next button you are indicating your voluntary participation in this study.

**Transition**

First we would like to gather some information on your background with field sports!

Currently, or in the past, which of the following field sports have you predominately participated in (pick one)?

- [ ] Retriever Field Trials
- [ ] Retriever Hunting Tests
- [ ] Other

**CrCLD for Non Field Trial Participants**

The following questions will help us get a feel for your experiences with and your thoughts about cranial cruciate ligament disease. We will be using the acronym CCLD to refer to this disease in the coming questions.

Do you feel that CCLD is caused by? (Select all that apply)

- [ ] Trauma
- [ ] Degenerative disease
- [ ] Genetics
Which of the following would make you less inclined to purchase a puppy for retriever field work: (Select all that apply)

- [ ] The dog had been diagnosed with CCLD in one leg
- [ ] The dog had been diagnosed with CCLD in both legs
- [ ] The dog had a parent diagnosed with CCLD
- [ ] The dog had a sibling diagnosed with CCLD
- [ ] The dog had a relative (not parents or siblings) diagnosed with CCLD

Which of the following would make you less inclined to purchase a started dog for retriever field work: (Select all that apply)

- [ ] The dog had been diagnosed with CCLD in one leg
- [ ] The dog had been diagnosed with CCLD in both legs
- [ ] The dog had a parent diagnosed with CCLD
- [ ] The dog had a sibling diagnosed with CCLD
- [ ] The dog had offspring diagnosed with CCLD
- [ ] The dog had a relative (not parents or siblings) diagnosed with CCLD

Which of the following would make you less inclined to breed a dog/bitch: (Select all that apply)

- [ ] The dog/bitch had been diagnosed with CCLD in one leg
The dog/bitch had been diagnosed with CCLD in both legs
The dog/bitch had a parent diagnosed with CCLD
The dog/bitch had a sibling diagnosed with CCLD
The dog/bitch had offspring diagnosed with CCLD
The dog/bitch had a relative (not parents or siblings) diagnosed with CCLD

How many retrievers have you owned from January 2010 to now?

How many retrievers have you have owned since January 2010 that have been diagnosed with CCLD?

How many retrievers have you owned since before January 2010 that have been diagnosed with CCLD?

Do you know anyone who has owned a retriever diagnosed with CCLD?

☐ Yes
☐ No
☐ Unsure

Do you feel a diagnosis of CCLD has a negative impact on a retrievers ability to participate in a sport or training?

☐ Yes
☐ No
☐ Unsure
How can CCLD negatively impact a retriever's ability to participate in a sport or training? (select all that apply)

- [ ] Shortens their career
- [ ] Decreases the success of their career
- [ ] Shortens their lifespan
- [ ] Increases their pain
- [ ] Decreases their mobility
- [ ] Decreases their quality of life
- [ ] Other

Do you see CCLD as an issue within retrievers?

- [ ] No Issue
- [ ] Moderate Issue
- [ ] Severe Issue

Do you feel that over time the problem of CCLD in field retrievers has been:

- [ ] Improving
- [ ] Worsening
- [ ] Staying the same

**Handler Demographics**

How are you involved with the sport of field trials? (Select all that apply)

- [ ] Professional Handler/Trainer
- [ ] Amateur Handler/Trainer
- [ ] Veterinarian
- [ ] Owner
For how many years have you been involved in field trials? (need not be currently participating)

Did you read the article Crucial Facts on Cruciate Disease in the June, July and/or August 2020 Retriever News?

○ Yes
○ No

CrCLD Demographics

Cranial Cruciate Ligament Disease affects approximately 2.6% of dogs in the US with a higher incidence noted in Labrador Retrievers. We are interested to see if this number is different in field trial retrievers and how we can use that information to help your dogs in the future.

The following questions will help us get a feel for your experiences with and knowledge of cranial cruciate ligament disease. For the rest of the survey we will be using the acronym CCLD to refer to the disease.

Do you feel that CCLD is caused by? (Select all that apply)

☐ Trauma
☐ Degenerative disease
☐ Genetics
☐ Overuse
☐ Conformation
Which of the following would make you less inclined to purchase a new field trial puppy:
(Select all that apply)

- The dog had been diagnosed with CCLD in one leg
- The dog had been diagnosed with CCLD in both legs
- The dog had a parent diagnosed with CCLD
- The dog had a sibling diagnosed with CCLD
- The dog had a relative (not parents or siblings) diagnosed with CCLD

Which of the following would make you less inclined to purchase a started field trial dog:
(Select all that apply)

- The dog had been diagnosed with CCLD in one leg
- The dog had been diagnosed with CCLD in both legs
- The dog had a parent diagnosed with CCLD
- The dog had a sibling diagnosed with CCLD
- The dog had offspring diagnosed with CCLD
- The dog had a relative (not parents or siblings) diagnosed with CCLD

Which of the following would make you less inclined to breed a field trial dog/bitch:
(Select all that apply)

- The dog/bitch had been diagnosed with CCLD in one leg
How many field trial retrievers have you owned from January 2010 to now?

How many field trial retrievers have you owned since January 2010 that have been diagnosed with CCLD?

How many field trial retrievers have you owned since before January 2010 that have been diagnosed with CCLD?

Do you know anyone who has owned a field trial retriever diagnosed with CCLD?

- Yes
- No

Do you feel a diagnosis of CCLD has a negative impact on a retrievers’ training or trialing ability?

- Yes
- No
- Maybe
How can CCLD negatively impact a retrievers' training or trialing ability? (select all that apply)

☐ Shortens their career
☐ Decreases the success of their career
☐ Shortens their lifespan
☐ Increases their pain
☐ Decreases their mobility
☐ Other

Do you see CCLD as an issue within the field trial population?

☐ No Issue
☐ Moderate Issue
☐ Severe Issue

Do you feel that over time, in this population, the problem of CCLD has been:

☐ Improving
☐ Worsening
☐ Staying the same

Transition

Do you own an AKC registered retriever intended for field trial training or competition at this time?

☐ Yes
☐ No

Transition
Thank you for taking the time to answer these initial questions. Any additional dog specific information you can provide will be a extremely valuable contribution to this study, maximizing benefits to all in the end.

Please click on the next arrow and the following block of questions will prompt you to input information about the dogs you currently own. Information provided should only regard AKC registered retrievers intended for field trial training and competition. These questions will repeat for each dog you choose to enter. Please enter information regarding all dogs that you own, not just those affected as it will help keep our final data analysis accurate.

The information gathered in this section will be used to learn more about the impact of cranial cruciate ligament disease (CCLD) on you and your fellow field trial retrievers and in turn can be used to help the sport as a whole in the future!

Dog 1

What is your dogs' breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other
What is your dog's sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dog's age (in years)?

What is your dog's approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

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Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
- No

What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected
(Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- ☐ Tibial Tuberosity Advancement (TTA)
- ☐ Tibial Plateau Leveling Osteotomy (TPLO)
- ☐ Extracapsular Suture/Tightrope
- ☐ Other ________________________________

Has this dog returned to competition post treatment?

- ○ Yes
- ○ No

Does this dog have offspring?

- ○ Yes
- ○ No

Do you have another AKC registered field trial retriever to fill out this form for?

- ○ Yes
- ○ No

Dog 2

What is your dogs’ breed?

- ○ Labrador Retriever (Yellow)
What is your dog’s sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dog’s age (in years)?

What is your dog’s approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that
How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?
- Yes
- No

Which leg was affected?
- Left
- Right
- Both

Was this diagnosis made by a veterinarian?
- Yes
- No

What was the severity of the damage?
- Unsure
- Partial tear/rupture
What treatments were performed? Include information on all legs that are affected (Select all that apply)

☐ Surgery
☐ Orthotics/braces
☐ Supplements
☐ Medication
☐ Hydrotherapy (professionally)
☐ Laser therapy
☐ Stem cell therapy
☐ Professional rehab
☐ At home rehab
☐ Other

What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

☐ Tibial Tuberosity Advancement (TTA)
☐ Tibial Plateau Leveling Osteotomy (TPLO)
☐ Extracapsular Suture/Tightrope
☐ Other

Has this dog returned to competition post treatment?

☐ Yes
☐ No

Does this dog have offspring?

☐ Yes
Do you have another AKC registered field trial retriever to fill out this form for?

- Yes
- No

**Dog 3**

What is your dogs' breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other

What is your dogs' sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dogs' age (in years)?
What is your dogs' approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?

- Left
- Right
Was this diagnosis made by a veterinarian?
- Yes
- No

What was the severity of the damage?
- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)
- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other [ ]

What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)
- Tibial Tuberosity Advancement (TTA)
- Tibial Plateau Leveling Osteotomy (TPLO)
Has this dog returned to competition post treatment?

☐ Yes
☐ No

Does this dog have offspring?

☐ Yes
☐ No

Do you have another AKC registered field trial retriever to fill out this form for?

☐ Yes
☐ No

**Dog 4**

What is your dogs' breed?

☐ Labrador Retriever (Yellow)
☐ Labrador Retriever (Black)
☐ Labrador Retriever (Chocolate)
☐ Golden Retriever
☐ Chesapeake Bay Retriever
☐ Curly-Coated Retriever
☐ Flat Coated Retriever
☐ Irish Water Spaniel
☐ Nova Scotia Duck Tolling Retriever
What is your dogs' sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dogs' age (in years)?

What is your dogs' approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each
Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
- No

What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- [ ] Tibial Tuberosity Advancement (TTA)
- [ ] Tibial Plateau Leveling Osteotomy (TPLO)
- [ ] Extracapsular Suture/Tightrope
- [ ] Other

Has this dog returned to competition post treatment?

- [ ] Yes
- [ ] No

Does this dog have offspring?

- [ ] Yes
- [ ] No

Do you have another AKC registered field trial retriever to fill out this form for?

- [ ] Yes
- [ ] No

Dog 5
What is your dog's breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other

What is your dog's sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dog's age (in years)?

- 

What is your dog's approximate weight (in lbs)?

- 

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No
What level(s) did they compete at from January 2010 to present? (select all that apply)

☐ Open All-Age
☐ Amateur All-Age
☐ Qualifying
☐ Derby
☐ Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

☐

Has this dog been diagnosed with CCLD?

☐ Yes
☐ No

Which leg was affected?

☐ Left
☐ Right
☐ Both

Was this diagnosis made by a veterinarian?

☐ Yes
☐ No

What was the severity of the damage?

☐ Unsure
What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other

What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- Tibial Tuberosity Advancement (TTA)
- Tibial Plateau Leveling Osteotomy (TPLO)
- Extracapsular Suture/Tightrope
- Other

Has this dog returned to competition post treatment?

- Yes
- No

Does this dog have offspring?
Do you have another AKC registered field trial retriever to fill out this form for?

- Yes
- No

Dog 6

What is your dog's breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other

What is your dog's sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact
What is your dog's age (in years)?

What is your dog's approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?
Was this diagnosis made by a veterinarian?

- Yes
- No

What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other

What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)
□ Tibial Tuberosity Advancement (TTA)
□ Tibial Plateau Leveling Osteotomy (TPLO)
□ Extracapsular Suture/Tightrope
□ Other

Has this dog returned to competition post treatment?

☐ Yes
☐ No

Does this dog have offspring?

☐ Yes
☐ No

Do you have another AKC registered field trial retriever to fill out this form for?

☐ Yes
☐ No

**Dog 7**

What is your dogs' breed?

☐ Labrador Retriever (Yellow)
☐ Labrador Retriever (Black)
☐ Labrador Retriever (Chocolate)
☐ Golden Retriever
☐ Chesapeake Bay Retriever
☐ Curly-Coated Retriever
☐ Flat Coated Retriever
☐ Irish Water Spaniel
What is your dogs' sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dogs' age (in years)?

What is your dogs' approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet
How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?
- Yes
- No

Which leg was affected?
- Left
- Right
- Both

Was this diagnosis made by a veterinarian?
- Yes
- No

What was the severity of the damage?
- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)
- Surgery
- Orthotics/braces
- Supplements
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

☐ Tibial Tuberosity Advancement (TTA)
☐ Tibial Plateau Leveling Osteotomy (TPLO)
☐ Extracapsular Suture/Tightrope
☐ Other ____________________

Has this dog returned to competition post treatment?

☐ Yes
☐ No

Does this dog have offspring?

☐ Yes
☐ No

Do you have another AKC registered field trial retriever to fill out this form for?

☐ Yes
☐ No
Does this dog participate in field trial training or trials or have they in the past?
What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

- Yes
- No

Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
- No
What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other

What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- Tibial Tuberosity Advancement (TTA)
- Tibial Plateau Leveling Osteotomy (TPLO)
- Extracapsular Suture/Tightrope
- Other

Has this dog returned to competition post treatment?

- Yes
- No
Does this dog have offspring?

- Yes
- No

Do you have another AKC registered field trial retriever to fill out this form for?

- Yes
- No

**Dog 9**

What is your dog's breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other

What is your dog's sex?

- Male Neutered
- Female Neutered
- Male Intact
What is your dogs' age (in years)?

What is your dogs' approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?

- Yes
- No
Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
- No

What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

☐ Tibial Tuberosity Advancement (TTA)
☐ Tibial Plateau Leveling Osteotomy (TPLO)
☐ Extracapsular Suture/Tightrope
☐ Other

Has this dog returned to competition post treatment?

☐ Yes
☐ No

Does this dog have offspring?

☐ Yes
☐ No

Do you have another AKC registered field trial retriever to fill out this form for?

☐ Yes
☐ No

Dog 10

What is your dog's breed?

☐ Labrador Retriever (Yellow)
☐ Labrador Retriever (Black)
☐ Labrador Retriever (Chocolate)
☐ Golden Retriever
☐ Chesapeake Bay Retriever
What is your dogs’ sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dogs’ age (in years)?

What is your dogs’ approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
- No

What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- [ ] Tibial Tuberosity Advancement (TTA)
- [ ] Tibial Plateau Leveling Osteotomy (TPLO)
- [ ] Extracapsular Suture/Tightrope
- [ ] Other

Has this dog returned to competition post treatment?

- [ ] Yes
- [ ] No

Does this dog have offspring?

- [ ] Yes
- [ ] No

Do you have another AKC registered field trial retriever to fill out this form for?

- [ ] Yes
- [ ] No
Dog 13

What is your dogs' breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other

What is your dogs' sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dogs' age (in years)?

- 

What is your dogs' approximate weight (in lbs)?

-
Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
- Derby
- Have not trialed yet

How many trials did this dog run from January 2010 to present day? (include each individual stake)

- Yes
- No

Has this dog been diagnosed with CCLD?

- Yes
- No

Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other

What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- Tibial Tuberosity Advancement (TTA)
- Tibial Plateau Leveling Osteotomy (TPLO)
- Extracapsular Suture/Tightrope
- Other

Has this dog returned to competition post treatment?

- No
- Unsure
- Partial tear/rupture
- Full tear/rupture
Does this dog have offspring?

- Yes
- No

Do you have another AKC registered field trial retriever to fill out this form for?

- Yes
- No

**Dog 14**

What is your dogs' breed?

- Labrador Retriever (Yellow)
- Labrador Retriever (Black)
- Labrador Retriever (Chocolate)
- Golden Retriever
- Chesapeake Bay Retriever
- Curly-Coated Retriever
- Flat Coated Retriever
- Irish Water Spaniel
- Nova Scotia Duck Tolling Retriever
- Other [ ]

What is your dogs' sex?

- Male Neutered
- Female Neutered
What is your dog's age (in years)?

What is your dog's approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

What level(s) did they compete at from January 2010 to present? (select all that apply)

How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?

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Which leg was affected?

- Left
- Right
- Both

Was this diagnosis made by a veterinarian?

- Yes
- No

What was the severity of the damage?

- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)

- Surgery
- Orthotics/braces
- Supplements
- Medication
- Hydrotherapy (professionally)
- Laser therapy
- Stem cell therapy
- Professional rehab
- At home rehab
- Other
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

- [ ] Tibial Tuberosity Advancement (TTA)
- [ ] Tibial Plateau Leveling Osteotomy (TPLO)
- [ ] Extracapsular Suture/Tightrope
- [ ] Other

Has this dog returned to competition post treatment?

- [ ] Yes
- [ ] No

Does this dog have offspring?

- [ ] Yes
- [ ] No

Do you have another AKC registered field trial retriever to fill out this form for?

- [ ] Yes
- [ ] No

**Dog 15**

What is your dog's breed?

- [ ] Labrador Retriever (Yellow)
- [ ] Labrador Retriever (Black)
- [ ] Labrador Retriever (Chocolate)
- [ ] Golden Retriever
What is your dogs' sex?

- Male Neutered
- Female Neutered
- Male Intact
- Female Intact

What is your dogs' age (in years)?

What is your dogs' approximate weight (in lbs)?

Does this dog participate in field trial training or trials or have they in the past?

- Yes
- No

What level(s) did they compete at from January 2010 to present? (select all that apply)

- Open All-Age
- Amateur All-Age
- Qualifying
How many trials did this dog run from January 2010 to present day? (include each individual stake)

Has this dog been diagnosed with CCLD?
- Yes
- No

Which leg was affected?
- Left
- Right
- Both

Was this diagnosis made by a veterinarian?
- Yes
- No

What was the severity of the damage?
- Unsure
- Partial tear/rupture
- Full tear/rupture

What treatments were performed? Include information on all legs that are affected (Select all that apply)
What kind of surgery was performed? Include information on all legs that are affected (Select all that apply)

☐ Tibial Tuberosity Advancement (TTA)
☐ Tibial Plateau Leveling Osteotomy (TPLO)
☐ Extracapsular Suture/Tightrope
☐ Other __________

Has this dog returned to competition post treatment?

☐ Yes
☐ No

Does this dog have offspring?

☐ Yes
☐ No