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Dog Bite Investigative Worksheet

EVENT INFORMATION:

Agency: _____

Case number: _____

Bite level classification: _____

Date: _____ Time: _____

Location of attack: _____

Number of dogs involved in the attack: _____

Nature of location (inside, outside, etc.): _____

Lighting: _____

Weather at the time of the attack: _____

DOG INFORMATION:

Dog name: _____

Breed: _____

Sex: _____ Age: _____

Color, markings: _____

Height: _____

Weight: _____

Owner name, address: _____

Owner Race: _____ Sex: _____

Disposition of dog: _____

(Euthanized? Date, time, by whom. Euthanasia chemical used. Authorization of euthanization?)
(Returned to owners? Date, time, by whom, authorization)
(Destroyed at scene? By whom? Circumstances? Body retained for analysis?)

Source of dog-name/address: _____

Type of source (breeder, pet store, etc.): _____

Number of previous homes: _____

Parents known? Yes No

Parents owners-full info (supplementary case numbers): _____

Parents available for exam/interview? Yes No

Parents source-name/address: _____

Parents source type: _____

Siblings known? Yes No

Sibling owners name/address of each: _____

Siblings available for exam/interview? Yes No
(supplementary case numbers)

Reproductive status of dog: _____

Ever bred? Yes No

If female, is dog in estrus/recently been in/expected to be in soon? Yes No

Identity/location of progeny: _____

Illness/injury? Yes No Describe if yes: _____

Vaccine history: _____

Is dog currently on any medication? Yes No

If yes describe: _____

Hearing? _____

Eyesight? _____

Hip conditions? _____

BLOOD TESTS

Samples taken-Date: _____ Time: _____

By whom? _____

Fresh or post mortem? _____

Chem/CBC: _____

Thyroid: _____

Steroids: _____

Testosterone: _____

Amphetamines/stimulants: _____

Hormones: _____

Body condition/musculoskeletal: _____

Parasites: _____

TRAINING/SOCIALIZATION

Has dog had training? Yes No

By whom, when, where, type: _____

Any earned titles? Yes No

If yes list: _____

Used as:

Guard dog	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Military dog	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Police dog	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Schutzhund	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Has dog ever been fought? Yes No

Living conditions: _____

(Type of neighborhood-rural, suburbs, urban
Type of residence-apartment, town home/patio home/duplex, single family home, property over 1 ac, other
Containment: Fence, chain, tether, pen, indoor, none
Primarily kept indoors or outdoors
Sleeping arrangements)

Diet: _____

Fed by: _____

Where, how often: _____

Who disciplines dog: _____

Usual method: _____

Who has most frequent interaction with dog: _____

Does dog have regular contact with other dogs? Yes No

Type, duration, frequency, location:

Has dog shown aggression toward other dogs/animals? Yes No

Describe fully:

FAMILY:

Type/ Family makeup-adults/children/infants: _____

Basic dynamics: _____

Quantity of contact with human family/quality: _____

Aggression toward family members? Yes No

Contact with other humans: _____

How often? _____

Where? _____

Adults, children, infants? _____

Differing races? _____

Disabled persons? _____

Aggression towards other humans:

Adults Yes No

Children or infants? Yes No

Races: Yes No

Disabilities? Yes No

Males vs. females? _____

BITE INCIDENT VICTIM INFORMATION

Name: _____

Address: _____

Sex: _____ Race: _____ Height: _____ Weight: _____

If female, was victim menstruating at the time of the attack. Yes No

Relationship of victim to owner: _____

Relationship to dog: _____

Was victim disabled or ill? Yes No

Under treatment for mental disability? Yes No

Any unusual physical attributes? Yes No Describe. _____

Does victim have a history of seizures? _____

Does victim have a history of heart disease?

Victim dress at the time of the attack?

Victim's actions immediately before the attack.

Was victim known to the dog? Yes No

Did victim have contact with the dog prior to this incident? Yes No

Prior aggressive contact? Yes No

WITNESSES TO THE INCIDENT:

Name: _____

Address: _____

Telephone: _____

Details of the actual attack-sequence of events, response of victim, dog, and witnesses.

Exact injuries to victim. Order of injuries if established: _____

Details of any injuries to the dog, including when in the course of the attack injuries occurred.

Was the attack on dog's home territory or in a place familiar to the dog? _____

Were there other animals present or involved in the attack? _____

Full information and actions of each one: _____

Relationship of other dogs to the victim and to the primary dog. _____

BEHAVIORAL EVALUATION OF DOG:

Date, time, location of evaluation-location type: _____

Physical demeanor of dog at initial contact: _____

Responses of dog to stimuli (if available):

- | | | |
|---------------------------------|---------------------------------|------------------|
| GR-growl | RR-retreat/run away | NA-Not available |
| BT-bare teeth | SR-submissive roll or urination | |
| LU-lunge/charge | AG-evacuate anal gland | |
| SB-snap/bite-engage and release | PR-Positive reaction | |
| BF-full bite | NR-No reaction | |

Approach dog		Bend over dog/demand down	
Pet dog		Enter or leave room	
Hug dog		Reach toward dog w/o leash	
Approach on furniture		Reach toward dog w/leash	
Call off furniture		Put on/take off leash	
Push/pull off furniture		Put on/take off collar	
Disturb while resting/sleeping		Place in crate/pen	
Approach while chewing/playing		Remove from crate/pen	
Approach while eating		Leash restraint	
Touch while eating		Collar restraint	
Take dog food away		Bathe/groom dog	
Take human food away		Trim nails	
Take toy/chewy/bone		Response to obedience command	
Verbally correct		Veterinary clinic visit	
Physically punish		Strange adult enter house/yard	
Stare at dog		Strange child enter house/yard	
Response to familiar dog on leash		Familiar adult enter house/yard	
Response to strange dog on leash		Familiar child enter house/yard	
Response to familiar dog off leash		Stranger sudden approach	
Response to strange dog off leash		Familiar person sudden approach	