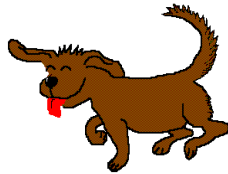


Appendix C  
**A survey about the dietary intake and  
activity patterns of Swedish dogs**

**Weighed registration of the food  
intake of the dog for 7 days and  
registration of the activity performed**



Picture by Katarina Cvek-Hopkins, SLU

*We ask you to answer the questions by crossing in the appropriate box or write on the intended row. To be able to draw correct conclusion from the material, it is important that you answer all questions. All information that you give is considered confidential.*

*You have now received an electronic scale **to weigh everything the dog eat in 7 days**. Remember that also small bits to taste, dog treats and what is given outside the meals is to be registered. Have this form ready so that it is easy to register directly after consumption. For exercise, you are to register the type and amount of exercise the dog does each day.*

**General questions about the dog and the owner**

1. Name of the owner \_\_\_\_\_

2. Address \_\_\_\_\_

3. Telephone home \_\_\_\_\_ 4. Telephone work \_\_\_\_\_

5. Name of the dog \_\_\_\_\_



## Activity of the dog\*\*

Weekday the \_\_\_\_\_ (date)

7. How many hours has your dog been alone (no human contact) today? \_\_\_\_\_

8. How many times has the dog been taken for walks today (including short “pee-walks”)? \_\_\_\_\_

9. Have your dog played with other dogs today?  No  Yes, \_\_ hours

10. Have you been playing with a ball, stick, frisbee or similar with the dog today?  No  Yes, \_\_\_\_\_ number of times

11. Register the type and amount of exercise performed today

- Walks, time \_\_\_\_\_ min
- Jogging, time \_\_\_\_\_ min
- Cycle exercise, time \_\_\_\_\_ min
- Other \_\_\_\_\_

12. Have your dog worked with any of the following today?

- 0  No
- |   |   |
|---|---|
| 1 <input type="checkbox"/> Obedience __ hours/week    | 6 <input type="checkbox"/> IPO/protective __ hours/week   |
| 2 <input type="checkbox"/> Agility _____ hours/week   | 7 <input type="checkbox"/> Search/rescue _____ hours/week |
| 3 <input type="checkbox"/> Tracking _____ hours/week  | 8 <input type="checkbox"/> Guarding _____ hours/week      |
| 4 <input type="checkbox"/> Searching _____ hours/week | 9 <input type="checkbox"/> Herding _____ hours/week       |
| 5 <input type="checkbox"/> Reporting _____ hours/week | 10 <input type="checkbox"/> Hunting _____ hours/week      |

**\*\*THE DOG OWNERS RECEIVED ONE PRINTED PAPER  
FOR EACH WEEKDAY**