



Rabbit Behavior Assessment

The goal of the Fairfax Pets On Wheels Rabbit Behavior Assessment is to determine how the bunny/handler team will react to and cope with the pressures of the nursing home environment they will visit.

The team evaluation begins at the time the handler and pet walk through the door for their appointment. How the rabbit interacts with the other pets to be evaluated, the handler's awareness and control of the bunny, and whether the rabbit is or becomes comfortable with the environment are taken into account.

In addition to observing the rabbit's comfort level around medical equipment, the evaluator will observe the bunny's reaction to loud noises and being lightly pinched and having its tail and ears gently pulled. Handlers must have good control of their rabbits at all times.

Owners should print and complete "Rabbit Behavior Assessment Part 1" (pages 2 and 3) and bring it to your scheduled behavior assessment appointment.

To assist you in preparing for the assessment, you may want to review and print the form our testers will use (pages 4-7) to evaluate your rabbit.

FAIRFAX PETS ON WHEELS, Inc.
RABBIT Behavior Assessment
Part 1: to be completed by Owner/Handler

OWNER INFORMATION
Owner's Name:
Street Address:
City/State/Zip:
Day Phone:
Evening Phone:
Cell Phone:
E Mail:
HANDLER INFORMATION (if handler other than owner)
Handler Name:
Street Address:
City/State/Zip:
Day Phone:
Evening Phone:
Cell Phone:
E Mail:
RABBIT INFORMATION
Name:
Breed:
Gender (please circle): M F
Spayed/Neutered (please circle): Y N
Color:
Age:
PLEASE CHECK ALL THAT APPLY TO YOUR RABBIT:
<input type="checkbox"/> Friendly
<input type="checkbox"/> Approaches strangers
<input type="checkbox"/> Seeks companionship
<input type="checkbox"/> Prefers to isolate him or herself
<input type="checkbox"/> Travels well
<input type="checkbox"/> Wears collar/harness and leash w/out objection
<input type="checkbox"/> Lives with other animals
<input type="checkbox"/> Fears other animals
<input type="checkbox"/> House Rabbit
<input type="checkbox"/> Outdoor Rabbit
<input type="checkbox"/> Playful/feisty
(over)

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RABBIT Behavior Assessment
Part 1: to be completed by Owner/Handler

PLEASE CHECK ALL THAT APPLY TO YOUR RABBIT:
<input type="checkbox"/> Couch potato
<input type="checkbox"/> Likes to sit on laps
<input type="checkbox"/> Enjoys being petted
<input type="checkbox"/> Affectionate/spontaneous
<input type="checkbox"/> When annoyed will bite
<input type="checkbox"/> Growls or thumps when provoked
<input type="checkbox"/> Leash trained
<input type="checkbox"/> Comes when called
<input type="checkbox"/> Knows his/her name
<input type="checkbox"/> Gets into carrier without a struggle
<input type="checkbox"/> Explores new environments
<input type="checkbox"/> Cowers, hides in strange places
<input type="checkbox"/> Litter Box trained
<input type="checkbox"/> Seldom uses claws
<input type="checkbox"/> Nails trimmed regularly
<input type="checkbox"/> Gives signals when uncomfortable
<input type="checkbox"/> Likes to be carried around
<input type="checkbox"/> Likes to snuggle
1) Has your rabbit ever bitten or nipped anyone? If yes, Describe
2) Has your rabbit been quarantined for any reason? If yes, Describe
3) Do you know of any reason or behavior that may preclude or limit your rabbit from performing functions as a Fairfax Pets On Wheels volunteer? If yes, Describe
4) Other comments you may wish to share, (optional)
Signature:
Date:
Thank you for taking the time to fill out this form and for volunteering for this program.

Fairfax Pets on Wheels RABBIT
 Behavior Assessment
 Part 2: to be completed by Evaluator

Pet Name:	Evaluator:
Breed:	Evaluation Date:
Owner Name:	Evaluation Location:

I. EQUIPMENT CHECK & APPEARANCE	Rating A = Acceptable U = Unacceptable	EVALUATOR COMMENTS
a. Rabbit is wearing equipment permitted for visiting by FPOW Acceptable: Collar/harness and leash are on FPOW approved list Unacceptable: Collar/harness or leash are not on FPOW approved list		
b. Rabbit is clean, well groomed / Nails are Clipped Acceptable: Clean, well groomed, including nails Unacceptable: Dirty, matted coat, unpleasant odor and/or open sores/skin lesions, dirty or malodorous ears, stitches and other conditions that make it unpleasant for residents to touch the animal		

II. SKILLS EXERCISE *Please rate this section at the end of the behavior evaluation	Rating A = Acceptable U = Unacceptable	EVALUATOR COMMENTS
a. Evaluator approaches rabbit and calmly pets it multiple times throughout the evaluation: Acceptable: Calm, sniffing, licks hand, enjoys petting, indifferent, submissive, aloof, rolling on back, ignores, rubs against hands; Unacceptable: Any signs of aggression, e.g. growling, grunting, snorting, struggles to get away;		

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 Behavior Assessment
 Part 2: to be completed by Evaluator

II. SKILLS EXERCISE - (CONTINUED)	Rating A = Acceptable U = Unacceptable	EVALUATOR COMMENTS
<p>b. Touch Sensitivity - Evaluator makes contact with rabbit and touches sensitive areas, e.g.: light pinch on ears, holds a paw, or other sensitive areas, light tugging on collar/harness, clumsy petting. Acceptable: Rabbit reacts ticklish, moves away, pulls paw away, but is forgiving; doesn't show any reaction, is curious and checks what Evaluator is doing Unacceptable: Any sign of aggression: biting, growling, grunting, snorting;</p>		
<p>c. Reaction to Equipment - Evaluator and helper stage two visiting situations with wheelchair and walker. 1. Handler and rabbit approach person in wheelchair and walker 2. Person in wheelchair and walker approach handler and rabbit Acceptable: Remains calm when approaching appliances and trusting of handler, remains calm when appliances approach and trusting of handler, a little cautious at first, but settles, indifferent, signs of minimal stress (considers fleeing but is calmed by handler) Unacceptable: Any sign of aggressive behavior, persistent fear and/or flee response, excessive pulling away from object</p>		
<p>d. Good Manners - Owner demonstrates their visiting technique with rabbit. Acceptable: Rabbit responsive to owner, walks on leash -OR- is content to be carried -OR- content to ride in basket, indifferent, displays curiosity, sits on handler's lap -OR- willing to sit on evaluators lap, relaxed, content; Unacceptable: Rabbit is hard to control; rabbit overly difficult to handle; e.g. handler unable to control rabbit walking between two locations in room, rabbit constantly jumps down, wriggles out of handler's arms multiple times;</p>		

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Behavior Assessment
Part 2: to be completed by Evaluator

Pet Name:

Evaluator:

II. SKILLS EXERCISE - (CONTINUED)	Rating A = Acceptable U = Unacceptable	EVALUATOR COMMENTS
<p>e. Reaction to Neutral Dog: Helper takes "neutral dog" and proceeds move close enough to rabbit handler that the rabbit sees "neutral dog". After visual contact, both parties move on. Acceptable: Rabbit may try to meet "neutral dog", but handler must keep good control, rabbit expresses dislike of "neutral dog" but remains under handler control, no reaction, thumps rear legs, tries to hide without fleeing; tensing up Unacceptable: Rabbit being evaluated panics or attempts to flee causing handler to lose control, displays aggressive reaction (to handler, evaluator, or directly toward "neutral dog")</p>		
<p>f. Evaluator makes loud noise like tossing clipboard or pebble can on floor Acceptable: Cowers, startles, tries to hide, does nothing, remains in control of the handler; Unacceptable: Rabbit panics or tries to flee, unable to calm down after noise event;</p>		

III. Evaluator's Opinion NOTE: An Unacceptable rating in any section other than Section I (Equipment and Appearance) results in a Not Recommended rating	Rating A = Acceptable U = Unacceptable	EVALUATOR COMMENTS
<p>After reading the handler's completed questionnaire and observing the handler/rabbit team's action and reactions during the practical evaluation, this team is: <input type="checkbox"/> Recommended for an on-site pilot tour <input type="checkbox"/> Not Presently Recommended, but recommended for re-testing at a later date - REQUIRES EVALUATOR COMMENTS <input type="checkbox"/> Not Recommended - REQUIRES EVALUATOR COMMENTS</p>		

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General Comments

Recommendations & Training

Evaluator's Name: _____

Evaluator's Signature _____

Date: _____

Evaluator has reviewed the test and this form with me:

Volunteer's Name: _____

Volunteer's Signature: _____

Date: _____

Nursing Home to begin visiting: _____