

# Sound Sensitivity Scale

(LSSS as developed by the University of Lincoln)

For each of the statements below, please place a cross in the box which most accurately describes your level of agreement with how your dog behaves in general in this situation. Please consider whether your dog's behaviour is of similar intensity and occurs as frequently as described. For example, if in item 2 your dog always becomes a little excited when it is about to go for a walk, you would mainly agree with the statement. If your dog has never encountered the situation and you are unable to predict the behaviour, please use the not applicable option.



Name of dog

## 1. Running around

Frequency:

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
Never	Rarely	Frequently	Every time

Intensity:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Small amount (occasional burst of activity)				Extensive amount (continuously running around)

## 2. Dribbling saliva

Frequency:

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
Never	Rarely	Frequently	Every time

Intensity:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Small amount (damp around mouth)				Extensive amount (pools of saliva)



### 3. Hiding (e.g. under furniture, behind owner, etc.)

Please indicate where:

Frequency:

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
ever	Rarely	Frequently	Every time

Intensity:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Small amount (retreats)				Extensive amount (will not be removed from hiding area)

### 4. Destructiveness (e.g. furniture, doors, carpets, etc.)

Please indicate which items tend to be damaged:

Frequency:

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
ever	Rarely	Frequently	Every time

Intensity:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Small amount (small items e.g. pens)				Extensive amount (e.g. holes in the wall)

### 5. Cowering (e.g. tucks tail flattens ears, etc.)

Frequency:

<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
Never	Rarely	Frequently	Every time

Intensity:

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Small amount (uneasy)				Extensive amount (petrified)



## 6. Restlessness/pacing

Frequency:

**0**

**1**

**2**

**3**

Never

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Small amount

Extensive amount  
(fixed route continuously traced)

## 7. Aggression (e.g. growling, snapping or biting)

Frequency:

**0**

**1**

**2**

**3**

Never

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Small amount  
(occasional growl)

Extensive amount  
(severe biting attempts made)

## 8. Dog freezing, not moving

Frequency:

**0**

**1**

**2**

**3**

Never

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Occurs sporadically  
within an event

Most of the time



### 9. Barking, whinning, howling

Please indicate which:

Frequency:

0

1

2

3

ever

Rarely

Frequently

Every time

Intensity:

1

2

3

4

5

Small amount

Extensive amount

### 10. Panting

Frequency:

0

1

2

3

Never

Rarely

Frequently

Every time

Intensity:

1

2

3

4

5

Occurs sporadically within an event

Most of the time

### 11. Vomiting, urinating, defecating and/or diarrhoea

Please indicate which:

Frequency:

0

1

2

3

ever

Rarely

Frequently

Every time

Intensity:

1

2

3

4

5

Small amount

Excessive amount



## 12. Owner seeking behaviour

Frequency:

**0**

**1**

**2**

**3**

ever

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Seeks out owner  
occasionally during the event

Will not leave owner  
in any circumstance

## 13. Vigilance, scanning of the environment

Frequency:

**0**

**1**

**2**

**3**

ever

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Occurs sporadically  
within an event

Most of the time

## 14. Finding safe places in the house (e.g. under the bed)

Frequency:

**0**

**1**

**2**

**3**

Never

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Occurs occasionally  
in response to certain noises

Occurs always in response  
to a wide range of sounds



### 15. Self harm

Frequency:

**0**

**1**

**2**

**3**

ever

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Small amount e.g. licking feet

Extensive amount  
e.g. broken teeth or nails

### 16. Trembling or shaking

Frequency:

**0**

**1**

**2**

**3**

ever

Rarely

Frequently

Every time

Intensity:

**1**

**2**

**3**

**4**

**5**

Occurs occasionally  
in response to certain noises

Occurs always in response  
to a wide range of sounds

**TOTAL SCORE:**