Orthopedic Foundation for Animals
Preliminary (Consultation) Report

A Not-For-Profit Organization

BLACKFORTH'S RAIZIN' KANE
registered name

SS02220001
registration number

LABRADOR RETRIEVER
breed

M
sex

10/4/2017
date of birth

13
age at evaluation in months

tattoo/microchip/DNA profile

2019333
application number

12/5/2018
date of report

film/case no(s)

Owner: AUDRY STEELMAN

Veterinarian:
ADVANCED CARE VETERINARY HOSPITAL
12226 HEYWOOD HILL RD
SAPULPA, OK 74066

RADIOGRAPHIC EVALUATION OF PELVIC PHENOTYPE WITH RESPECT TO HIP DYSPLASIA

* The study must be repeated when the animal is 24 months of age or older to qualify for an OFA number.

_____ **EXCELLENT HIP JOINT CONFORMATION***
superior hip joint conformation as compared with other individuals of the same breed and age

_____ **BORDERLINE HIP JOINT CONFORMATION**
marginal hip joint conformation of indeterminate status with respect to hip dysplasia at this time – **Repeat study in six months**

__√__ **GOOD HIP JOINT CONFORMATION***
well formed hip joint conformation as compared with other individuals of the same breed and age

_____ **MILD HIP DYSPLASIA**
radiographic evidence of minor dysplastic changes of the hip joints

_____ **FAIR HIP JOINT CONFORMATION***
minor irregularities of the hip joint conformation as compared with other individuals of the same breed and age

_____ **MODERATE HIP DYSPLASIA**
well defined radiographic evidence of dysplastic changes of the hip joints

_____ **SEVERE HIP DYSPLASIA**
radiographic evidence of marked dysplastic changes of the hip joints

HIP JOINTS - STANDARD VD VIEW
RADIOGRAPHIC FINDINGS

_____ subluxation
_____ remodeling of femoral head/neck
_____ osteoarthritis/degenerative joint disease
_____ shallow acetabula
_____ acetabular rim/edge change
_____ unilateral pathology _____ left _____ right
_____ transitional vertebra
_____ spondylosis
_____ panosteitis
_____ other

ELBOW JOINTS – FLEXED LATERAL VIEW

__√__ negative for elbow dysplasia __√__ L __√__ R

ELBOW DYSPLASIA

Grade I	L_____	R_____
Grade II	L_____	R_____
Grade III	L_____	R_____

RADIOGRAPHIC FINDINGS

degenerative joint disease (DJD)	L_____	R_____
ununited anconeal process (UAP)	L_____	R_____
fragmented coronoid process (FCP)	L_____	R_____
osteochondrosis	L_____	R_____

Consultation by: Greg Keller DVM
G.G. KELLER, DVM, MS, DACVR
CHIEF OF VETERINARY SERVICES

2300 E Nifong Blvd
Columbia MO 65201

Tele: (573) 442-0418
Fax: (573) 875-5073

Email: ofa@offa.org
Website: https://www.ofa.org

Companion Animal Eye Registry (CAER)

Orthopedic Foundation for Animals
2300 E Nifong Blvd, Columbia, MO 65201-3806
Phone: (573) 442-0418; Fax: (573)875-5073
www.ofa.org, A not-for-profit organization

Registered name: Blackfork's Raizin Kane
Breed: Labrador **Sex:** Male
ID Number (if any): ☐ Tattoo ☒ Microchip — 900164001505563
Registration Number: ☐ AKC ☐ Other — SS02220001
Date of Birth (mm/dd/yy): 100417 **Date of Exam (mm/dd/yy):** 012419

Owner Name: Audry Steelman
Co-Owner Name: **Phone:**
[redacted]
E-Mail (use both lines if needed): blackforklab@yahoo.com

I hereby certify that the animal examined is the animal described on this application, and understand that the results of this exam will be submitted by the examining ophthalmologist to the database for statistical gathering purposes. I understand that only passing results will be released to the public unless the initials of a registered owner or authorized agent appear in the authorization box below which permits the OFA to release non-passing results to the public.

[signature]
Signature of owner or authorized agent/representative

I hereby authorize the OFA to release the results of the evaluation of the animal described on this application to the public if the results are non-passing (initials) ______

- ☒ **I DID** verify microchip/tattoo on this dog
- ☐ **I DID NOT** verify microchip/tattoo on this dog
- ☐ **NO MICROCHIP / TATTOO PRESENT**

I certify that I have performed this ophthalmic examination using pharmacological mydriasis, ophthalmoscopy, and biomicroscopy.

Signature	ACVO #	Date
[signature]	507	1-24-19

Diplomate, American College of Veterinary Ophthalmologists

FEES AND CREDIT CARD INFORMATION ON THE BACK OF THE WHITE (OWNER) COPY

547034

Ophthalmologist Name: Dr. Jonathan Pucket EC507
Ophthalmologist Address: Oklahoma Veterinary Specialists
City: Tulsa **State:** OK **Zip/postal code:**
Phone: 918-299-4900 **ACVO #:**
Email:

RIGHT EYE	GLOBE	LEFT EYE
☐	microphthalmos	☐
☐	keratoconjunctivitis sicca	☐
☐	glaucoma	☐
	EYELIDS	
☐	entropion	☐
☐	ectropion	☐
☐	distichiasis	☐
☐	ectopic cilia	☐
☐	imperforate lacrimal punctum	☐
	NICTITANS	
☐	cartilage anomaly/eversion	☐
☐	gland prolapse	☐
☐	plasmoma/atypical pannus	☐
	CORNEA	
☐	dystrophy — epithelial/stromal	☐
☐	dystrophy — endothelial	☐
☐	pannus	☐
☐	pigmentary keratitis/keratopathy	☐
	UVEA	
☐	uveal cyst (free floating ☐ single ☐ multiple ☐)	☐
☐	iris coloboma	☐
☐	iris hypoplasia	☐
☐	iris sphincter dysplasia	☐
☐	pigmentary uveitis	☐
☐	uveal melanoma	☐
☐	persistent pupillary membranes (iris to iris ☐ iris to lens ☐ iris to cornea ☐ iris sheets ☐ lens pigment foci/no strands ☐ endothelial opacity/no strands ☐)	☐
	LENS	
☐ Incomp. ☐ Incip. ☐ Punc.	anterior cortex	☐ Punc. ☐ Incip. ☐ Incomp.
☐ ☐ ☐	posterior cortex	☐ ☐ ☐
☐ ☐ ☐	equatorial cortex	☐ ☐ ☐
☐ ☐ ☐	anterior sutures	☐ ☐ ☐
☐ ☐ ☐	posterior sutures	☐ ☐ ☐
☐ ☐ ☐	nucleus	☐ ☐ ☐
☐ ☐ ☐	capsular	☐ ☐ ☐
☐	generalized/complete	☐
☐	resorbing/hypermature	☐
☐	*suspect not inherited*	☐
☐	subluxation/luxation	☐
	VITREOUS	
☐	PHPV/PHTVL	☐
☐	persistent hyaloid artery	☐
☐ ant. chamber ☐ syneresis	degeneration	☐ syneresis ☐ ant. chamber

CORNEA (T N A P) — CATARACT (T N A P)

RIGHT EYE	FUNDUS	LEFT EYE
☐	retinal detachment	☐
☐	retinal atrophy — generalized	☐
☐	retinopathy	☐
☐ detached ☐ geographic ☐ folds	retinal dysplasia	☐ folds ☐ geographic ☐ detached
☐	choroidal hypoplasia	☐
☐	coloboma	☐
☐	optic nerve coloboma	☐
☐	optic nerve hypoplasia	☐
☐	micropapilla	☐
	OTHER CONDITIONS	
☐	Unlisted conditions suspected as **inherited**. Describe in comments	☐
☐	Unlisted conditions suspected as **not inherited**	☐
☒	**NORMAL**	☒

Comments
0.5-1mm upper lid mass right eye

WHITE = Owner/OFA Registration copy; PINK = ACVO Diplomate copy; YELLOW = ACVO Research copy

Exercise Induced Collapse DNA Test

Case Number: 118822
Owner: Audry Steelman

Canine Information

DNA ID Number: **165685**
Call Name: **Kane**
Sex: **Male**
Birthdate: **10/04/2017**
Breed: **Labrador Retriever**
Coat Color: **Yellow**
Registered Name: **Blackfork's Raizin' Kane**
Registration Number: **SS02220001**
Microchip/Tattoo: **900164001505563**

Report Date: 12/6/2018
DNA Result: **Clear (2 copies of the normal allele)**

These results are based on data obtained from analysis of unique DNA loci in accordance with the standards and protocols set forth by DDC Veterinary. The accuracy of the result is based on the information and the quality of samples provided by the client. DDC Veterinary does not assume responsibility of errors due to mislabeled or incorrectly sampled submissions.

Matt Shaunessy, Senior Scientist

Hereditary Nasal Parakeratosis DNA Test

Case Number: 118823
Owner: Audry Steelman

Canine Information

DNA ID Number: **165685**
Call Name: **Kane**
Sex: **Male**
Birthdate: **10/04/2017**
Breed: **Labrador Retriever**
Coat Color: **Yellow**
Registered Name: **Blackfork's Raizin' Kane**
Registration Number: **SS02220001**
Microchip/Tattoo: **900164001505563**

Report Date: 12/6/2018

DNA Result: **Carrier (1 normal allele/1 HNPK mutation)**

These results are based on data obtained from analysis of unique DNA loci in accordance with the standards and protocols set forth by DDC Veterinary. The accuracy of the result is based on the information and the quality of samples provided by the client. DDC Veterinary does not assume responsibility of errors due to mislabeled or incorrectly sampled submissions.

Matt Shaunessy, Senior Scientist

PRA-prcd DNA Test

Case Number: 118824
Owner: Audry Steelman

Canine Information

DNA ID Number: **165685**
Call Name: **Kane**
Sex: **Male**
Birthdate: **10/04/2017**
Breed: **Labrador Retriever**
Coat Color: **Yellow**
Registered Name: **Blackfork's Raizin' Kane**
Registration Number: **SS02220001**
Microchip/Tattoo: **900164001505563**

Report Date: 12/6/2018
DNA Result: **Clear (2 copies of the normal allele)**

These results are based on data obtained from analysis of unique DNA loci in accordance with the standards and protocols set forth by DDC Veterinary. The accuracy of the result is based on the information and the quality of samples provided by the client. DDC Veterinary does not assume responsibility of errors due to mislabeled or incorrectly sampled submissions.

Matt Shaunessy, Senior Scientist