

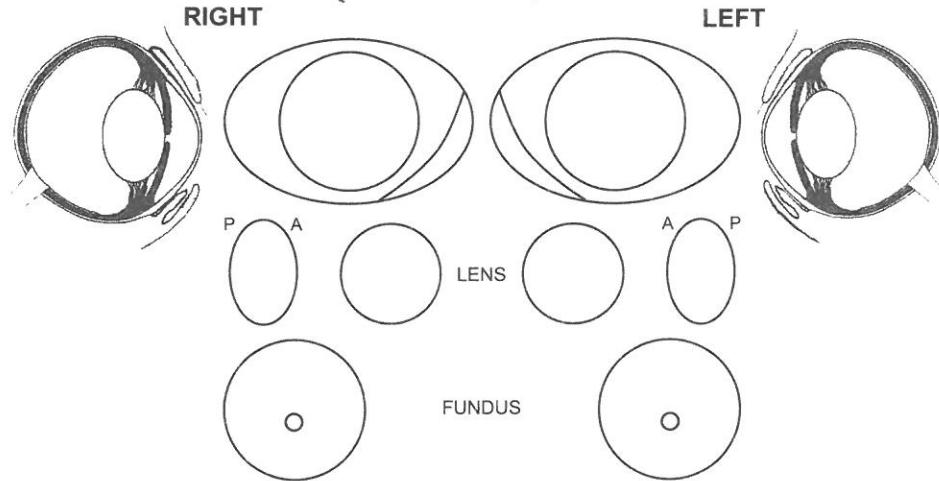
**British Veterinary Association/Kennel Club/International Sheep Dog Society (BVA/KC/ISDS)
CANINE HEALTH SCHEMES EYE EXAMINATION CERTIFICATE**

Pet name BARNLEY KC no. Microchip no. 933082607172701
 KC registered name WILLOWS ANNIE'S BARNLEY Date of previous examination _____
 Breed AUSTRALIAN LABRADOR Colour CARAMEL Sex M F Date of birth 16/03/2021
 Owner's name and address _____
 Owner's telephone number _____ Owner's email address _____
 Vet's name and address _____
 Vet's telephone number _____ Vet's email address _____

I hereby declare that the dog submitted for examination under the BVA/KC/ISDS Canine Health Scheme is the one described above and that the information obtained may be made available for research purposes and may be published. Any appeal against the results specified below must be made to the BVA (for details see EPWP1).
 I understand and agree that the use of a mydriatic agent Tropicamide is necessary to facilitate a complete examination of the eye and that a local anaesthetic will be used where gonioscopy is required.
 I understand that the personal information provided in this form will be used to administer the eye examination service and will be retained for 7 years for accounting purposes on an electronic system. My personal information may be used from time to time to provide me with relevant information relating to CHS services or for other lawful reasons.
 Signature of Owner/Agent [Signature] Date 25/10/2021

EXAMINATION OF THE EYE AND ADNEXA

Mydriatic Ophthalmoscopy Direct Indirect Biomicroscopy Gonioscopy Tonometry Other _____
 Parts Examined: Adnexa Cornea Drainage Angle Iris Lens Vitreous Fundus



Comments **NO BREED RELATED ADNEXAL OR OCULAR CONDITIONS**

DNA sample taken on this date: Yes No
 I confirm that the scanned microchip number matches the number on the certificate
 Information for owners/Appeals leaflet (EPWP1) issued

INHERITED EYE DISEASE STATUS

This section applies to the known inherited ocular conditions specified in the Procedure Notes. These results will be sent to the KC and/or ISDS as appropriate.

<p>CONGENITAL/NEONATAL</p> <p>(CEA) Collie eye anomaly - Choroidal hypoplasia - Coloboma</p> <p>(MRD) Multifocal retinal dysplasia (TRD) Total retinal dysplasia (CHC) Congenital hereditary cataract (PHPV) Persistent hyperplastic primary vitreous (PLA) Pectinate ligament abnormality</p>	<p>CLINICALLY UNAFFECTED</p> <div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>	<p>CLINICALLY AFFECTED</p> <div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>	<p>NON-CONGENITAL</p> <p>(HC) Hereditary cataract (PLL) Primary lens luxation (POAG) Primary open angle glaucoma (IOP) Intraocular pressure R mmHg L mmHg (PRA) Progressive retinal atrophy (RPED) Retinal pigment epithelial dystrophy</p>	<p>CLINICALLY UNAFFECTED</p> <div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>	<p>CLINICALLY AFFECTED</p> <div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>
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'Clinically affected' signifies that there is evidence of the inherited disease(s) specified, whereas 'Clinically unaffected' signifies that there is no such evidence.

Grade	0	1	2	3	Result
R					
L					

Gonioscopy Grading Result:
 0 = normal, 1 = mildly affected, 2 = moderately affected, 3 = severely affected.

Clinically affected with ocular conditions not currently specified in the Procedure Notes.

<p>Distichiasis</p> <p>Ectopic cilia</p> <p>Trichiasis</p> <p>Entropion</p> <p>Ectropion</p> <p>Combined entropion/ectropion</p> <p>Multi-ocular defects</p> <p>Corneal lipid deposition</p>	<div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>	<p>Persistent pupillary membrane</p> <p>Ocular Melanosis</p> <p>Pectinate ligament abnormality</p> <p>Lens luxation</p> <p>Anterior Capsular Cataract</p> <p>Anterior Cortical Cataract</p> <p>Perinuclear Cataract</p> <p>Nuclear Cataract</p>	<div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>	<p>Posterior Cortical Cataract</p> <p>Posterior Polar Subcapsular Cataract</p> <p>Posterior Capsular Cataract</p> <p>PHPV</p> <p>Optic nerve hypoplasia</p> <p>Posterior segment coloboma</p> <p>Choroidal hypoplasia</p> <p>MRD-like appearance</p>	<div style="border: 1px solid black; width: 10px; height: 100px; margin: 0 auto;"></div>	<p>GPRA-like appearance</p> <p>RPED-like appearance</p> <p>Other conditions (specify)</p> <p>_____</p> <p>_____</p> <p>_____</p>
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I have today examined the animal described above under the BVA/KC/ISDS Eye Scheme with the results as shown
 Signature of Panellist [Signature] Name I. K. Johnson Date 25/10/21

This certificate is valid for 12 months from date of signature with the exception of PLA Testing, which is valid for 3 years