



Animal

Name: AMAELINO DEL OREJANO
Breed: PASTOR AUSTRALIANO
Breedclub: _____
Registration no.: L.O.E.1886071
Colour: ROJO HILLO
Microchip no.: 941000011423136
Tattoo: _____
Date of birth: 22-4-09
Sex: Female Male
Previous examination: No Yes
 Unaffected Undetermined
 Suspicious Affected

Owner/agent

Name: EVA FARRERAS VALL
Address: _____
Country, Post code: SP 08240 Town: HANRESA

The undersigned agrees to the rules of the national scheme and confirms that the animal submitted for examination is the one described above. Signature also means that the results are available for official publication or other ECVO approved use.

Signature owner / agent _____

Examination

Date: 10-5-11
Method minimal: Mydriatic, indirect ophthalmoscopy and Binocular biomicroscopy >10x
Optional: Direct Ophthalmoscopy Photography
 Gonioscopy (without mydriatic) Other:
 Tonometry (applanation, without mydriatic) If an other method is used, this form only has value with a specifying certificate.

Identification

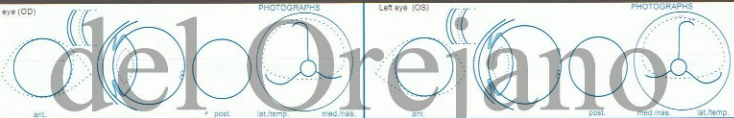
Check tattoo: Correct Partly/Unreadable Incorrect Absent
Check microchip: Correct Incorrect Absent

Right eye (OD)

PHOTOGRAPHS

Left eye (OS)

PHOTOGRAPHS



Descriptive comments: Eye disease no. mild moderate severe

Note: affected

name of disease / Under investigation; not yet proven to be inherited in this breed.

Results for the presumed hereditary eye diseases:

	UNFFECTED	UNDETERMINED	AFFECTED
1. Persistent Pupillary Membrane (PPM)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Persistent Hyperpl. Tunica Vasculosa Lentis/Primary Vitreous (PHTVL/PHPV)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Cataract (congenital)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Retinal Dysplasia (RD)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Hypoplasia/Micropapilla	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Collie Eye Anomaly (CEA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. L. pectinatum abn. (only after gonioscopy)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conditions valid for 12 months

	UNFFECTED	SUSPICIOUS	AFFECTED
11. Entropion/Trichiasis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Ectropion/Macroblepharon	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Distichiasis/Ectopic cilia	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Corneal dystrophy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Cataract (non-congenital)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Lens luxation (primary)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Retinal degeneration (PRA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Interpretation

* "Unaffected" signifies that there is no evidence of the presumed inherited eye disease(s) specified, whereas "affected" signifies that there is such evidence.
** The animal displays clinical features that could possibly fit the presumed inherited eye disease(s) mentioned, but the changes are inconclusive.
*** The animal displays minor, but specific signs of the presumed inherited eye disease(s) mentioned. Further development will confirm the diagnosis. Reexamination in 12 months.

FOR FURTHER INFORMATION: P.T.O.

Examiner

The undersigned has today examined the above mentioned animal for the hereditary eye disease scheme with the results as shown.

Name: Dra Maria Llena
Place: BEAUCENA/BARCELONA
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colour / distribution
1 white national registry
2 pink, examiner
3 yellow/orange/bred club
4 white ornamentation

Signature of examiner authorized by ECVO