

BRITISH VETERINARY ASSOCIATION/KENNEL CLUB HIP DYSPLASIA SCHEME

To: British Veterinary Association
Mansfield Street, London W1G 9NQ
Telephone: 020 7908 6380

16 - 164 110

THE ORIGINAL OF THIS
CERTIFICATE IS GREEN

Section A - TO BE COMPLETED BY OWNER/AGENT

AKC Registered Number SR 888 22109

KC Registered Name Moonlit Acres Legend
 Breed Golden Retriever Sex Male Date of birth 06/16/15
 Name of owner Lisa West Address 18826 NE 12th Cir
Brush Prairie, WA 98606

Sire: <u>Silky Thunder Storm</u>	Dam: <u>The Venet Ringmaster's mystical Dreams</u>
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I hereby declare that (NB: DELETION OF ANY OF THESE ITEMS INVALIDATES THIS CERTIFICATE)

- (a) The particulars above are correct and relate to the dog submitted for radiographic examination
- (b) This dog is a minimum of one year old and has not previously been scored under this Scheme
- (c) I give permission for a copy of the certificate to be sent to the geneticist retained by the breed society or other representative body
- (d) I give permission for the results of the examination to be used at a future date for the purpose of statistical research
- (e) I give permission for the results to be published and included on the relevant KC documents

Owner's/Agent's signature [Signature] Date 10/12/16

Section B - TO BE COMPLETED BY SUBMITTING VETERINARY SURGEON
(Section A must be completed in full before completing Section B)

Microchip/Tattoo no. 95600004389553

Microchip/Tattoo confirmed

I certify that the radiograph relating to the dog identified above was taken on the following date 12 Oct 16 and in conformity with the provisions of the Hip Dysplasia Scheme Procedure Notes

Veterinary surgeon submitting radiograph (BLOCK CAPITALS) EMMA HARVEY
 Address TIMBERLAND VET HOSPITAL
2150 US HWY 12, ETHEL, WA, USA Post code 98542
 Veterinary Surgeon's Signature [Signature] F/MRCVS Date Oct 12 16

Please submit the correct fee for the radiograph to be processed (cheques payable to BVA.) For current fees contact BVA

Section C - TO BE COMPLETED BY SCRUTINEERS

CERTIFICATE OF SCORING

HIP JOINT	Score Range	Right	Left
Norberg angle	0-6	1	0
Subluxation	0-6	1	2
Cranial acetabular edge	0-6	2	2
Dorsal acetabular edge	0-6	/	/
Cranial effective acetabular rim	0-6		
Acetabular fossa	0-6		
Caudal acetabular edge	0-5		
Femoral head/neck exostosis	0-6		
Femoral head recontouring	0-6		
TOTALS	(max possible 53 per column)	4	4

NB The scores represent the opinion of the BVA appointed scrutineers for the radiograph submitted. The lower the score, the less evidence of hip dysplasia present. Please consult the current procedure notes and breed mean score sheet for relevant details (available from BVA)

Total score (max possible 106)

WE HEREBY CERTIFY that the score of the radiograph submitted for the dog identified above was produced using the scoring criteria of the BVA/Kennel Club Hip Dysplasia Scheme Date 19 JAN 2017

Signed [Signature] F/MRCVS Signed [Signature] F/MRCVS 01/09

BRITISH VETERINARY ASSOCIATION/KENNEL CLUB ELBOW DYSPLASIA SCHEME

To: British Veterinary Association
7 Mansfield Street, London W1G 9NQ
Telephone: 020 7908 6380

46 - 164110

THE ORIGINAL OF THIS
CERTIFICATE IS GOLD

Section A - TO BE COMPLETED BY OWNER/AGENT

KC Registered Number

S	R	8	8	8	2	2	1	0	9
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KC Registered Name Moonlit Acres Legend
Breed Golden Retriever Sex Male Date of birth 06/10/15
Name of owner Lisa West Address 18826 NE 127th Circle
Brush Prairie WA 98606

Sire: <u>Silky Thunder Storm</u>	Dam: <u>Thevenet Ringmaster's mystical Dreams</u>
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I hereby declare that (NB: DELETION OF ANY OF THESE ITEMS INVALIDATES THIS CERTIFICATE)

- (a) The particulars above are correct and relate to the dog submitted for radiographic examination
- (b) This dog is a minimum of one year old and has not previously been graded under this Scheme
- (c) I give permission for a copy of the certificate to be sent to the geneticist retained by the breed society or other representative body
- (d) I give permission for the results of the examination to be used at a future date for the purpose of statistical research
- (e) I give permission for the results to be published and included on the relevant KC documents

Owner's/Agent's signature [Signature] Date 10/12/16

Section B - TO BE COMPLETED BY SUBMITTING VETERINARY SURGEON
(Section A must be completed in full before completing Section B)

Microchip/Tattoo no.

9	5	6	0	0	0	0	4	3	8	9	5	5	3
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 Microchip/Tattoo confirmed

I certify that the radiographs relating to the dog identified above were taken on the following date 12, Oct 116 and in conformity with the provisions of the Elbow Dysplasia Scheme Procedure Notes

Veterinary surgeon submitting radiographs (BLOCK CAPITALS) EMMA HARVEY
Address 215D US HWY 12 TIMBERLAND VET HOSPITAL
ETHEL, WA 98542 Post code 98542
Veterinary Surgeon's Signature [Signature] F/MRCVS Date 12, Oct 116

Please submit the correct fee for the radiographs to be processed (cheques payable to BVA.) For current fees contact BVA

Section C - TO BE COMPLETED BY SCRUTINEERS

CERTIFICATE OF GRADING

	RIGHT	LEFT
GRADE (range 0-3)	1	0

OVERALL GRADE
(max possible 3)

1

NB The grades are based on a flexed lateral and neutral lateral view of each elbow and represent the opinion of the BVA appointed scrutineers for the radiographs submitted. The lower the grade, the less evidence of elbow dysplasia present. The overall grade given for both elbows is that given to the elbow with the highest grade. Please consult the current procedure notes for relevant details (available from BVA)

WE HEREBY CERTIFY that the grade of the radiographs submitted for the dog identified above was produced using the grading criteria of the BVA/Kennel Club Elbow Dysplasia Scheme Date 19 JAN 2017

Signed [Signature] F/MRCVS Signed [Signature] F/MRCVS 01/09