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Accredited Breeders Scheme

NZKC

Private Bag 50903, Porirua 5240 Phone: (04) 237-4489; Fax: (04) 237-0721 www.nzkc.org.nz

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Application for Congenital Deafness Database

Registration number: OOO 6 - 6 Sex: Doc 9 Date of Birth (dd/ghm/yy) 1 2 1 2 0 Registration number of Sire: UK AHO 326 Date of current examination (dd/mm/	Colour: Barrel	
Do g Date of Birth (dd/ghm/yy) 12 11 20 Registration number of Sire: UK AHO 326	Band 14	
Registration number of Sire: (UK) AH0326	14	
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UK 1940326	Registration number	of Dam:
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Date of Christis and Christis		
Examining veterinarian's name or vet	erinary hospital:	
Mailing address:		
2	T.	Phone:
City:	Postcode:	Physic.
	email:	
CO-1021		
ly accepted nimal.		
passes the test. Unilateral or bilateral	deatness falls	
Deaf	Bilateral -	Unilateral
ding to the ABS procedure. og DID NOT verify tattoo/r 1930 Date:(Date/Mo	microchip information or 1 7 onth/Year)	n this dog
6.00		
55.00		
fastercard, payable to The New Zealand	l Kennel Club Inc	
	Mailing address: Chy: Phone (Mobile): Cresearch and for the statistical analysis and scientifical analysis analysis and scientifical analysis analys	Phone (Mobile): research and for the statistical analysis and scientific research to be published. 193201 (Date) tresult is required to process this application ly accepted nimal. Deaf Bilateral ling to the ABS procedure. 19317 Date:(Date/Month/Year)

Joe Mayhew Consulting Limited 2 Owen Road Gisborne 4010 06 9277263 027 437 3651

BAEP HEARING TEST RESULTS - 19th March 2017

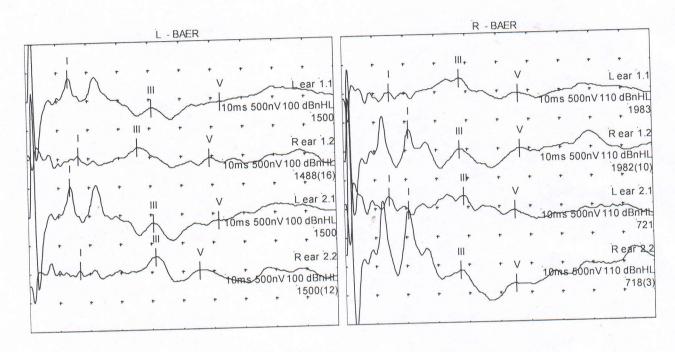
Patient ID: VA04

AXEL Brown

Sex:

Male

Age: 2 Years 4 Months



Conclusion: Normal hearing bilaterally.

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Joe Mayhew BVSc, PhD, DSc, FRCVS, DACVIM, DECVN Veterinary Neurologist

Kiwibank

Name: JOE MAYHEW CONSULTING LIMITED

Number: 38 9007 0724352 00