

EYEVET SERVICES

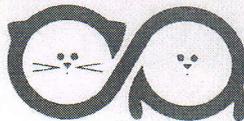
Craig Irving - Specialist Veterinary Ophthalmologist

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MAE



OPHTHALMIC EXAM. CERTIFICATE.

Owner *A. Calman* Animal Name *Svedanka Maybel Dale*

Address N. Z. K. C. Reg No. *00572-2015*

Microchip

ANIMAL: Species *Dog* Breed *Cocker Spaniel* D.O.B *21/10/14*

Coat Color/Type *Blue* Sex *B*

"I hereby declare that the animal submitted for examination is the animal described above.
Furthermore I am the owner or agent for this animal."

Signed: Owner/Agent *[Signature]* Date *30/10/17*

PREVIOUS EXAMINATION: NOT PREV EXAMINED NOT AFFECTED
UNDETERMINED AFFECTED

EXAMINATION TECHNIQUE: DIRECT OPHTHALMOSCOPY INDIRECT OPHTHALMOSCOPY
BIOMICROSCOPY OTHER

MYDRIATIC: YES NO

REGION (S) EXAMINED: LIDS CORNEA IRIS LENS FUNDUS OTHER

NOT AFFECTED
UNDETERMINED/SUSPICIOUS
AFFECTED

COMMENTS:

INHERITED DISEASE: YES NO SUSPICIOUS

DATE OF EXAMINATION *30-10-17*

SHOULD BE RE-EXAMINED MONTHS YEARLY

SIGNED *[Signature]*

EXAMINER PROHIBITS USE OF HIS NAME FOR ADVERTISING PURPOSES.