

Cyrus

# EYEVET SERVICES

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## OPHTHALMIC EXAM. CERTIFICATE.

Owner Trudy Wainman Animal Name Cornerstone Magical M  
Address 1 Leonard Rd N. Z. K. C. Reg No. 00650-2013  
Rd 1 Upper Hutt Microchip.....

ANIMAL: Species dog Breed Labrador D.O.B. 27/11/2012  
Coat Color/Type yellow Sex dog

"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 25/8/13

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 25-8-13

SHOULD BE RE-EXAMINED ..... MONTHS YEARLY .....

SIGNED [Signature]

EXAMINER PROHIBITS USE OF HIS NAME FOR ADVERTISING PURPOSES.