

## Ophthalmic Examination Certificate



Patient No: 11419

Date of Examination: 17/08/2015

Owner: R &amp; S Harries

Address: 490 Monument Road

Clevedon R.D.2 Papakura

Breed: Labrador Rtrvr

Age / DOB: 25/01/2009

Patient: Ollie

K.C. Name: Southerly Raincheck

K.C. No: 01882-2009

Chip: 956 000001017579

Sex: male

Colour: Black

I/we hereby declare that the dog submitted  
for examination is the dog described.

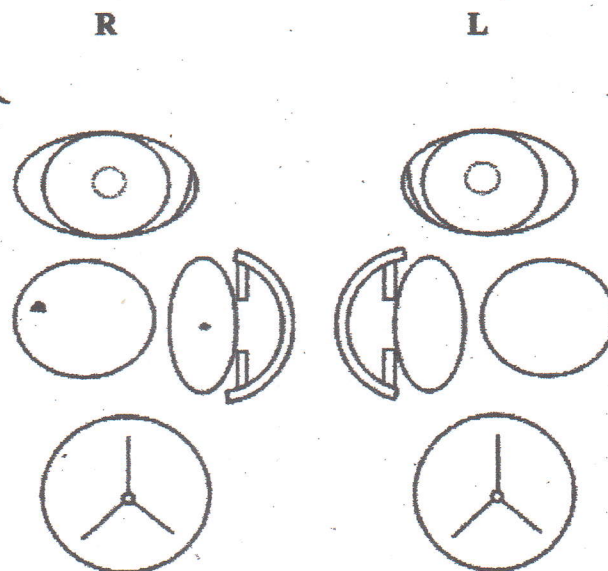
Previous Examination: Affected: \_\_\_ Not Affected: \_\_\_ Unknown: \_\_\_ Not Examined: ☒

Examination Techniques: Indirect Ophthalmoscopy: X, Biomicroscopy: X, Mydriatic: X,  
Other: \_\_\_\_\_

Regions:	Eyelids	Cornea	Lens	Fundi	Other
Not Affected	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> ①	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Undetermined	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Comments:

- ① Small focal cataract  
in ② lateral anterior cortex  
- Not reported as gaster.  
OK to breed.



Annual Re-examination  
Recommended

Signed:   
P. N. Collinson  
BVSc, MVS, FRCVSc

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