

Office Use Only

APPL _____

RAD _____

CK _____

Accredited Breeders Scheme

NZKC

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

Office
Use
Only

Application for Hip/Elbow Dysplasia Database

Please type or print legibly. To ensure accuracy please enclose copy of the dog's registration papers

Previous application number (if any):		Registration number: 02748-2013	
Registered name: ASHDALE RED LABEL FOX JANCERIE		Sex: DOG	Colour: YELLOW
Breed: LABRADOR RETRIEVER		Date of Birth (dd/mm/yy) 01/03/13	
ID Number (if any): 900108000517069	<input type="checkbox"/> Tattoo <input checked="" type="checkbox"/> Microchip	Registration number of Sire: SR66422507	Registration number of Dam: SR63837904
Owner Name: ALISON BATTRICK		Date of current examination (dd/mm/yy)	
Co-owner Name:		Examining veterinarian's name or veterinary hospital: MARK WORTH VETS	
Mailing address: 150 BRADDICK ROAD, RD 5		Mailing address: 18 NEVILLE STREET, WARKWORTH	
City: WELLSFORD	Postcode: 0975	City:	Postcode:
Phone (Mobile): 0212103396	email:	Phone (Mobile):	email:

☒ I declare that the details of the dog described are accurate and relate to the dog tested.

☒ I hereby authorise release of the test results to the NZKC for publication on this dog's pedigree.

☒ I give my consent for these results to be used for the purpose of statistical analysis and scientific research and for the statistical and scientific research to be published.

A. Battick (Signature of owner) 5-5-14 (Date)

Veterinary Information

This animal was restrained using:

Chemical Restraint

1. Anesthesia type Medetomidine / Butorphanol
2. Tranquilizer type _____
3. Other type _____

Veterinarian's signature

Instructions

Please attach original results for verification or email link to results

I have reviewed the result for the dog described above.

The total hip score/distraction index was

R: 1 L: 1

The Elbow Grade was

R: 0 L: 0

Signed

Coast to Coast Vets

4 SCHOOL RD
WELLSFORD
PH: 09 423 7048

- ☒ I certify that the examination was performed according to the ABS procedure.
- ☒ I DID verify tattoo/microchip information on this dog ☐ I DID NOT verify tattoo/microchip information on this dog

Veterinarian Signature

Date: (Date/Month/Year)

Fees:

Fees for data base entry by submitter \$5.00

Fees for data base entry by NZKC \$35.00

Payments can be made by cheque, cash, bank deposit, Visa or Mastercard, payable to The New Zealand Kennel Club Inc

Card Number (Visa or Mastercard)

Name on Card

Expiry Date



PLEASE PRINT OUT AND TAKE TO YOUR VETERINARIAN

ORIGINAL

5080

HIP AND ELBOW DYSPLASIA GRADING SCHEME

Dr R J Rawlinson BVSc, DVR, FACVSc
 ABN 99 577 155 747
 PO Box 1626
 Mt. Barker
 South Australia 5251
 Tele/Fax (08) 8391 0079
 E-mail robrawlo@live.com.au

PLEASE NOTE THAT CREDIT WILL BE
 EXTENDED ONLY TO VETERINARY
 PRACTICES.
 OWNERS MUST INCLUDE PAYMENT

PLEASE PRINT ALL DETAILS AND PROVIDE FULL POSTAL ADDRESS

KC Registered Name ASHDALE RED LABEL FOR
JANCERIE

Kennel Club No. 02748-2013

Microchip No. 900108000517069
 M'chip No. Displayed on xray plate ☒ Y/N

Breed LABRADOR RETRIEVER Sex M Date Born 1-3-13 Date X-Rayed 7-3-14

Sire RIO ROCKS RED RYDER AT PGS PENARA'S WITHOUT WARNING
DAVIKAS (USA) PGD CENTRECOURT ALL FIRED UP AT APPLEWOOD

Dam BLACKFORK CHERRY FIZZ MGS OAKDALES DUNBAR AT PENARA
AT ASHDALE (IMPUSA) MGS BLACKFORK'S FLAMING ROBIN

Owner's Name ALISON BATTRICK

Address 150 BRADDICK ROAD. RDS. WELLSFORD. NEW ZEALAND

Phone No. 09 4315881 M 0212103396 Fax/E-Mail allybattrick@gmail.com

I declare that (a) the particulars above relate to the dog x-rayed;
 (b) I give consent for the result to be submitted for statistical analysis;
 (c) I give consent for the statistical analysis to be published.

Owner's signature [Signature] Date 7-3-14

Veterinarian taking x-ray Dr Daniel Cook Signature [Signature]

Address: WARKWORTH VETS. 18 NEVILLE STREET. WARKWORTH. NZ.

Phone No. 09 4258244 Fax/E-mail Warkworthvets@paradise.net.nz

HIP SCORE

Hip	Right	Left
Norberg Angle	0	0
Subluxation	1	1
Cranial acetabular edge	0	0
Dorsal acetabular edge	0	0
Cranial eff. acet.rim	0	0
Acetabular fossa	0	0
Caudal acetabular edge	0	0
Fem. Neck exostosis	0	0
Fem. head recontouring	0	0
Total	1	1

HIP GRADE

Australian Grade 0 1 2 3 4 5 6

International Grade A² B C D E

Score 2

ELBOW GRADE

Right UAP 0 1 2 3 (mm)

Left UAP 0 1 2 3 (mm)

Dr. R J Rawlinson

[Signature]

Date

14/3/2014