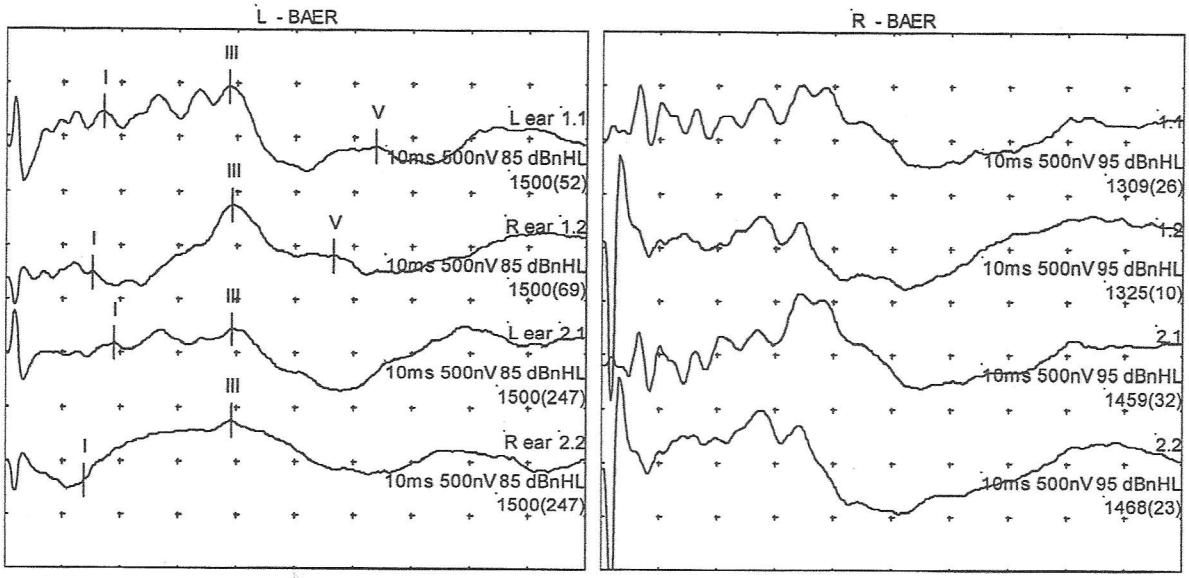
Joe Mayhew Consulting Ltd.
29 Heathcote Place
Palmerston North 4410
06 354 9700
027 437 3651

BAEP HEARING TEST RESULTS

Patient ID: BT-2 **Age:** 0 Years 2 Months
Sex: Male
Notes: Henry
985170000136182

BAER



Normal hearing bilaterally.

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

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 Congenital Deafness 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: 05613-2011		
Registered name: Raiden Jack The Jill			Sex: D	Colour: White with markings	
Breed: Bull Terrier			Date of Birth (dd/mm/yy) 17-07-2011		
ID Number (if any): ☐ Tattoo ☑ Microchip 985170000136182			Registration number of Sire: AL01850104	Registration number of Dam: 07498-2005	
Owner Name: Kathryn Joyce			Date of current examination (dd/mm/yy) 13-09-2011		
Co-owner Name: n/a			Examining veterinarian's name or veterinary hospital: Total Vets Ltd		
Mailing address: 235 Southfield Drive			Mailing address: 516 Gloucester St Christchurch 8011 Ph. 389 4564 www.totalvets.co.nz		
City: Lincoln	Postcode: 7608	Phone: 3252993	City:	Postcode:	Phone:
Phone (Mobile): 021 137 9328	email: jamo@ihug.co.nz		Phone (Mobile):	email:	

☑ I declare that the details of the dog described are accurate and relate to the dogs tested.
☑ I hereby authorise the 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 analysis and scientific research to be published.

Joyce (Signature of owner) 27-04-2012 (Date)

A photocopy of the test result is required to process this application

Veterinary Instructions

The Brainstem Auditory Evoked Response (BAER) test is the only accepted method of diagnosis. One test suffices for the life time of the animal.

Bilateral hearing passes the test. Unilateral or bilateral deafness fails

☑ Hearing (Normal) ☐ Equivocal ☐ Deaf _____Bilateral _____Unilateral

☑ 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) 5 April 2012

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