## Office Use Only APPL\_ RAD

## **Accredited Breeders Scheme**

**NZKC** 

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

Use Only

## **Application for Hip/Elbow Dysplasia Database**

Please ty <sub>1</sub>	be or print legibly.	To ensure accuracy p	lease enclose copy of the dog's regi	stration papers
Previous application number (if any):			Registration number:	1-2014
Registered name: Ashdale Mid-Knight Jazz			sex: Bitch	7-2014 Colour: Black
Ashdale Mid-Knight Jazz  Breed: Labrados Retriever			Date of Birth (dd/mm/yy) 09   08   2014	
10 Number (If any): Tattoo Microchip 900108001654198			Registration number of Sire: SIR 55745270 [	Registration number of Dam: 3100275047
Owner Name: Denise RobeAs			Date of current examination (dd/mm/yy)  04   11 ( 2015	
Co-owner Name:			Examining veterinarian's name or veterinary hospital:  Nowkworth Vets, Dr Cash	
Mailing address:  211 Ryan Rd RD5			Mailing address:  18 Neville St  City: Postcode: Phone:	
Wellsford	Postcode: 0975	Phone: 4314962	Warkworth	0910 994258244
hone (Mobile): 1274263709 re 11 2xtra co.nz			Phone (Mobile):	warknowthvetsaparadistine
This animal was restrained using:  Chemcial Restraint  1. Anesthesia type  2. Tranquilizer type  3. Other type  Veterinarian's signature			Instructions Please attach original results for verification index ver	cation or email link to results described above.
Certify that the examination of the cochine to the	p information on t	according to the A	ABS procedure.  NOT verify tattoo/microchip  Date:(Date/Month/Year	
Fees: Fees for data base entry by sub Fees for data base entry by NZI	mitter	\$35.00	able to The New Zealand Kennel Club I	Inc
Card Number (Visa or Mastercard)		Name	on Card	Expiry Date

ORIGINAL.

## 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

Dr. R J Rawlinson

PLEASE NOTE THAT CREDIT WILL BE EXTENDED ONLY TO VETERINARY PRACTICES.

OWNERS <u>MUST</u> INCLUDE PAYMENT

E-mail robrawlo@live.com.au PLEASE PRINT ALL DETAILS AND PROVIDE FULL POSTAL ADDRESS Kennel Club No. 05909 -2014 Mid-Knight Microchip No. 900 10800 1654 198 riever Sex B Date Born 9/8/14 Breed Labrador Rex CANTAMGREH Sire Saddlehill MGS AM GRC Waltzing Matilela MGS HM GRC # HE (ImpAst) MGS Elkers Red Menise Roberts Ryan Rd, RDS, Wellsford 0975 Phone No. H4314962 M0274263709 Fax/E-Mail rel1 2 xtra. co.n (a) the particulars above relate to the dog x-rayed; I declare that (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 Veterinarian taking x-ray Address: Fax/E-mail Phone No. HIP GRADE HIP SCORE Left Right Hip Norberg Angle Subluxation Australian Grade 0 0 Cranial acetabular edge 0 0 Dorsal acetabular edge 0 Cranial eff. acet.rim International Grade (A) B 0 Acetabular fossa 0 Caudal acetabular edge Fem. Neck exostosis Fem. head recontouring Total Right UAP (0) 1 2 3 ( mm) **ELBOW GRADE** 1 2 3 ( UAP(0) mm)

1 Rawlinson. Date 16/11/15.