

# Auckland Animal Eye Centre


## Ophthalmic Examination Certificate



Patient No: 10108

Date of Examination: 01/05/2014

**Owner:** Marion Gilhooley  
**Address:** 2/16 Cairnbrae Court  
Northcross, Browns Bay Auckland  
**Breed:** Swedish Vallhund  
**Age / DOB:** 10/08/2008

**Patient:** Harley  
**K.C. Name:** Vallarity Harlem Shuffle  
**K.C. No:** 06246-2008  
**Chip:** 978 000001435172   
**Sex:** male **Colour:** Sable

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"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Undetermined	___	___	___	<input checked="" type="checkbox"/> (1)	___
Affected	___	___	___	___	___

### Comments:

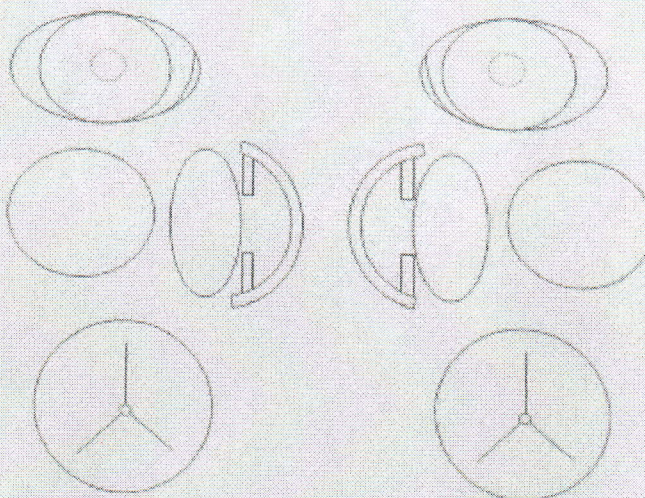
① Bilateral thin peripheral retinas.

Caution with breeding

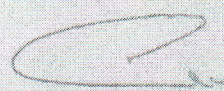
Advice RIV in 3-6 mths

R

L



Annual Re-examination  
Recommended

Signed:   
P. N. Collinson