



**Orthopedic Foundation for Animals**

2300 E Nifong Blvd, Columbia, MO 65201-3806

Phone: (573) 442-0418; Fax: (573) 875-5073

www.ofa.org, A not-for-profit organization

Registered name: PUPPY LOVES LIVIN THE DREAM  
Breed: Australian Multigen Labrador F. Sex: \_\_\_\_\_  
ID Number (if any):  Tattoo  Microchip  
956000005712829  
Registration Number:  AKC  Other  
ALAA-068941  
Date of Birth (mm/dd/yy): 03/14/18 Date of Exam (mm/dd/yy): 09/21/18  
Owner Name: Kelsie Payne Phone: \_\_\_\_\_  
Co-Owner Name: Dance Conrad Phone: 403 633 3125  
Owner Address: Box 1262  
City: Cardston State: AB Zip/postal code: T0K 0K0  
E-Mail (use both lines if needed):  
kelsie@puppylove  
labradoodles.com

I hereby certify that the animal examined is the animal described on this application, and understand that the results of this exam will be submitted by the examining ophthalmologist to the database for statistical gathering purposes. I understand that only passing results will be released to the public unless the initials of a registered owner or authorized agent appear in the authorization box below which permits the OFA to release non-passing results to the public.

Kelpay  
Signature of owner or authorized agent/representative

I hereby authorize the OFA to release the results of the evaluation of the animal described on this application to the public if the results are non-passing (initials) \_\_\_\_\_

I DID verify microchip/tattoo on this dog  
 I DID NOT verify microchip/tattoo on this dog

I certify that I have performed this ophthalmic examination using pharmacological mydriasis, ophthalmoscopy, and biomicroscopy.

Signature: BSJL ACVO # 246 Date: 9/21/18

Diplomate, American College of Veterinary Ophthalmologists

FEEs AND CREDIT CARD INFORMATION ON THE BACK OF THE WHITE (OWNER) COPY



504918

**Companion Animal Eye Registry (CAER)**

RIGHT EYE GLOBE LEFT EYE  
 microphthalmos   
 keratoconjunctivitis sicca   
 glaucoma   
**EYELIDS**  
 entropion   
 ectropion   
 distichiasis   
 ectopic cilia   
 imperforate lacrimal punctum   
**NICTITANS**  
 cartilage anomaly/eversion   
 gland prolapse   
 plasmoma/atypical pannus   
**CORNEA**  
 dystrophy — epithelial/stromal   
 dystrophy — endothelial   
 pannus   
 pigmentary keratitis/keratopathy   
**UVEA**  
 uveal cyst   
 iris coloboma   
 iris hypoplasia   
 iris sphincter dysplasia   
 pigmentary uveitis   
 uveal melanoma   
 persistent pupillary membranes   
**LENS**  
CATARACT Incomp. Incip. Punc. Punc. Incip. Incomp. CATARACT  
 anterior cortex        
 posterior cortex        
 equatorial cortex        
 anterior sutures        
 posterior sutures        
 nucleus        
 capsular        
 generalized/complete   
 resorbing/hypermature   
 suspect not inherited   
 subluxation/luxation   
**VITREOUS**  
ant. chamber syneresis  PHPV/PHTVL  syneresis ant. chamber   
 persistent hyaloid artery   
degeneration

Ophthalmologist Name: \_\_\_\_\_  
Ophthalmologist Address: Dr. Brian J. Skorobohach EC246  
Calgary Animal Referral & Emergency Ctr  
City: Calgary 12th St SE Zip/postal code: T2H 2Y4  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

RIGHT EYE FUNDUS LEFT EYE  
 detached  geographic  folds  retinal detachment   
 retinal atrophy—generalized   
 retinopathy   
retinal dysplasia  folds  geographic  detached   
 choroidal hypoplasia   
 coloboma   
 optic nerve coloboma   
 optic nerve hypoplasia   
 micropapilla   
**OTHER CONDITIONS**  
 Unlisted conditions suspected as inherited. Describe in comments   
 Unlisted conditions suspected as not inherited

**NORMAL**

Comments  
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