



**Orthopedic Foundation for Animals**

2300 E. Nifong Blvd, Columbia, MO 65201-3806  
Phone: (573) 442-0418; Fax: (573) 875-5073  
[www.ofa.org](http://www.ofa.org), A not-for-profit organization

Registered name: PRARIE'S MIRACLE MILK-Y Sex: F  
Breed: Australian Labradoodle  
ID Number (if any):  Tattoo  Microchip 0C10006876  
Registration Number:  AKC  Other WALA00015333

Date of Birth (mm/dd/yy): 011219 Date of Exam (mm/dd/yy): 112919

Owner Name: Shona Keelm Phone: 250-804-6809  
Co-Owner Name: \_\_\_\_\_  
Owner Address: 174 Kappel St.  
City: Sikamous State: NC Zip/postal code: 28781

E-Mail (use both lines if needed): skeehnsic@gmail.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. 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.

Signature of owner or authorized agent/representative: [Signature]  
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) [Signature]

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: [Signature] Date: 12-11-2019  
ACVO # 127

Diplomate, American College of Veterinary Ophthalmologists  
**FEE'S AND CREDIT CARD INFORMATION ON THE BACK OF THE WHITE (OWNER) COPY**



493707

**Companion Animal Eye Registry (CAER)**

Dr. Charlotte B. Keller, DACVO  
EC-127

Ophthalmologist Name: Western Canada Veterinary Eye Specialists  
Ophthalmologist Address: 604-540-4944  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/postal code: \_\_\_\_\_  
Phone: \_\_\_\_\_ ACVO #: \_\_\_\_\_  
Email: \_\_\_\_\_

**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

**CORNEA**  
T  N  P   
A

endothelial opacity/no strands   
lens pigment foci/no strands   
iris sheets   
iris to cornea   
iris to iris   
iris to lens   
iris to pupil   
single   
multiple   
free floating   
persistent pupillary membranes

**LENS**  
Incip.  Punc.  Incip.  Punc.   
anterior cortex   
posterior cortex   
equatorial cortex   
anterior sutures   
posterior sutures   
nucleus   
capsular   
generalized/complete   
resorbing/hypermature   
**suspect not inherited**  
subluxation/luxation   
**VITREOUS**  
PHPV/PHTVL   
persistent hyaloid artery   
degeneration   
synchysis   
ant. chamber

**CATARACT**  
T  N  P   
A

**RIGHT EYE** **FUNDUS** **LEFT EYE**  
 detached  geographic  folds  
 retinal detachment   
 retinal atrophy—generalized   
 retinopathy   
 retinal dysplasia   
 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