

ORIGINAL

9017

HIP AND ELBOW DYSPLASIA GRADING SCHEME

Dr R J Rawlinson BVSc DVR FACVSc
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Telephone/Fax (08) 8391 0079
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PLEASE NOTE THAT CREDIT WILL BE EXTENDED
ONLY TO VETERINARY PRACTICES
OWNERS MUST INCLUDE PAYMENT
Please contact Dr Rawlinson for current fees
Payment can be made by direct deposit
Australia - BSB 182 512 Account No 960572345
NZ - Swift Code MACQAU25
Please identify deposit with your name and the dog's no or invoice no

PLEASE PRINT ALL DETAILS AND PROVIDE FULL POSTAL ADDRESS

ANKC Registered Name SOVERENPARK BLAZE OF GLORY ANKC Member No. 3100310858

REG ANKC Member No. 3100310858

Microchip No. 956000003707244 ✓

Breed WHITE SWISS SHEPHERD DOG Sex M Date Born 7/8/14 Date X-Rayed _____

Sire EISHUND SEIZE THE DAY PGS CH. URAN SHIRO OF THE WHITE WOLVES HOME (IMP NLD)

PGD VIVID DAYDREAM DAISY'S PEARL (IMP NLD)

Dam CH. FANTASY OD BIJELIH ANDELA (IMP HRV) MGS BUL. CH. BIH. CH. MK. CH. HRV. CH. FUEGO BIALA PASJA (HRV)

MGD SRB. CH. HRV. CH. CORINA FLIEGELAND (HRV)

Owner's Name BRUCE + DONNA STORROCK

Address _____

Phone No H 03 9305 5855 Fax/Email craigieburnah@pacifc.net.au

I declare that (a) the particulars above relate to the dog x-rayed;
(b) I give consent for the result to be submitted to the AVA ANKC and the NGRC for statistical analysis; N/A
(c) I give consent for the statistical analysis to be published. N/A

Owner's signature Donna L Storrock Date 18.8.15

Veterinarian taking x-ray DR. MICHAEL BELL Signature _____

Address 9 CRAIGIEBURN RD CRAIGIEBURN VICTORIA 3064

Phone No 03 9305 5855 Fax/Email craigieburnah@pacifc.net.au

HIP SCORE	Right	Left
Hip		
Norberg Angle	0	0
Subluxation	1	1
Cranial acetabular edge	1	1
Dorsal acetabular edge	0	0
Cranial effective acetabular rim	0	0
Acetabular fossa	0	0
Caudal acetabular edge	0	0
Femoral neck exostosis	0	0
Femoral head recontouring	0	0
Total	2	2

HIP GRADE
Australian Grade 0 1 2 3 4 5 6
International Grade A² B C D E
Score 4

ELBOW GRADE
Right UAP 0 1 2 3 (mm)
Left UAP 0 1 2 3 (mm)

DR R J RAWLINSON Rob Rawlinson DATE: 24/08/15