

BRITISH VETERINARY ASSOCIATION/KENNEL CLUB HIP DYSPLASIA SCHEME

To: British Veterinary Association
Mansfield Street, London W1G 9NQ
Telephone: 020 7636 6541

14-140277



Section A - TO BE COMPLETED BY OWNER/AGENT

KC Registered Number **A P 0 3 0 4 0 9 0 1**

KC Registered Name **THISTLEGLLEN MORANGIE**
 Breed **FINNISH LAPPHUND** Sex **F** Date of birth **08.07.2012**
 Name of owner **MRS CAROL STRACHAN** Address **40 SCALLOWAY PARK**
FRASERBURGH, ABERDEENSHIRE

Sire: KONTIOHARJUN UNIKUVA	PGS*:	
	PGD*:	
Dam: THISTLEGLLEN CHIQUITITA	MGS*:	
	MGD*:	

I hereby declare that (NB: DELETION OF ANY OF THESE ITEMS INVALIDATES THIS CERTIFICATE)

*These sections are not mandatory

- (a) The particulars above are correct and relate to the dog submitted for radiographic examination
- (b) This dog is a minimum of one year old and has not previously been scored under this Scheme
- (c) I give permission for a copy of the certificate to be sent to the geneticist retained by the breed society or other representative body
- (d) I give permission for the results of the examination to be used at a future date for the purpose of statistical research
- (e) I give permission for the results to be published and included on the relevant KC documents

Owner's/Agent's signature *[Signature]* Date **24.12.14**

Section B - TO BE COMPLETED BY SUBMITTING VETERINARY SURGEON
(Section A must be completed in full before completing Section B)

Microchip/tattoo number: **95600008667413**

I certify that the radiograph relating to the dog identified above was taken on the following date **24.10.2014** and in conformity with the provisions of the Hip Dysplasia Scheme Procedure Notes

Veterinary surgeon submitting radiograph (BLOCK CAPITALS) **ALICE LAMONT**
 Address **BUCHAN VETERINARY CLINICS**
29 FINLAYSON STREET, FRASERBURGH Post code **AB43 9JG**
 Veterinary Surgeon's Signature *[Signature]* F/MRCVS Date **24.1.09.14**

Please submit the correct fee for the radiograph to be processed (cheques payable to BVA.) For current fees contact BVA

Section C - TO BE COMPLETED BY SCRUTINEERS

CERTIFICATE OF SCORING

HIP JOINT	Score Range	Right	Left
Norberg angle	0-6	1	0
Subluxation	0-6	3	3
Cranial acetabular edge	0-6	2	2
Dorsal acetabular edge	0-6		
Cranial effective acetabular rim	0-6		
Acetabular fossa	0-6		
Caudal acetabular edge	0-5		
Femoral head/neck exostosis	0-6		
Femoral head recontouring	0-6		
TOTALS	(max possible 53 per column)	6	5

NB The scores represent the opinion of the BVA appointed scrutineers for the radiograph submitted. The lower the score, the less evidence of hip dysplasia present. Please consult the current procedure notes and breed mean score sheet for relevant details (available from BVA)

Total score (max possible 106)

WE HEREBY CERTIFY that the score of the radiograph submitted for the dog identified above was produced using the scoring criteria of the BVA/Kennel Club Hip Dysplasia Scheme Date **28 MAY 2014**

Signed *[Signature]* F/MRCVS Signed *[Signature]* F/MRCVS **08/05**