Application for Advanced Cardiac Database

Orthopedic Foundation for Animals
2300 E Nifong Blvd, Columbia, MO 65201-3806
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www.ofa.org, A not-for-profit organization

Performed in association with the Orthopedic Foundation for Animals (OFA) and the American College of Veterinary Internal Medicine-Cardiology (ACVIM)

ACVIM
American College of Veterinary Internal Medicine

Registered name: Cookie of CKA Cavaliers

Call name: Cookie | Weight: ☐ kg ☒ lbs ☒ Estimate 12

Breed: King Charles Cavalier | Gender: F

Sire Registration #: CKC GJ3904393 | Dam Registration #: TS4106 10604

Registration Number: ☐ AKC ☐ Other NHABA2097007001

ID Number (if any): ☐ Tattoo ☒ Microchip 981020004740170

Date of Birth: (MMDDYY) 062922 | Date of Exam: (MMDDYY) 040625

Owner Name: Carolyn Taylor

Co-Owner Name: | Phone: 603.472.6015

Owner Address: 386 Dudley Rd

City: Alton | State: NH | Zip/postal code: 03809

E-Mail (use both lines if needed): Tiaylor.2009@yahoo.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 cardiologist 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.

[signature]
Signature of owner or authorized agent/representative

I hereby authorize the OFA to release equivocal or abnormal results to the public. (initials) ______

Cardiologist Name: John MacGregor

Phone #: 207-878-3121 | OFA Examiner #: CM-01

E-Mail (use both lines if needed): nevcardio@hotmail.com

Fees and credit card information on back of WHITE sheet.

03/01/2023

C173652

EXAMINATION FINDINGS

AUSCULTATION (REQUIRED)

Normal ☒ Abnormal ☐ Arrhythmia ☐

Murmur Grade: I ☐ II ☐ III ☐ IV ☐ V ☐ VI ☐

PMI: Left ☐ Right ☐ Base ☐ Apex ☐

Timing: Systolic ☐ Diastolic ☐ Continuous ☐

Extra Sounds: Click ☐ Gallop ☐ Split S1 ☐ Split S2 ☐

ECHOCARDIOGRAM (REQUIRED)

RV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐ ____mm

RA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐ ____mm

LV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐

LVIDd: 26 mm LVIDdn: ____ mm (MM ☒ 2D ☐)

LVIDs: 12 mm LVIDsn: ____ mm (MM ☒ 2D ☐)

LV EDVI (2D): ____ mL/m² LV ESVI (2D): ____ mL/m²

SF: 53 % (MM ☒ 2D ☐) EF (2D volumetric): 86 %

IVS: IVSd 6 mm Normal ☒ Abnormal ☐ (MM ☒ 2D ☐)

PW: PWd 8 mm Normal ☒ Abnormal ☐ (MM ☒ 2D ☐)

LA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐

LAd: 13 mm: SAx ☒ LAx ☐ (MM ☒ 2D ☐) EPSS: 1 mm

Ao Diameter: 15 mm LA/Ao: 0.86 Method: ____

TV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐

TR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ Vel. ____ m/s

MV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐

MR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ Vel. ____ m/s

LVOT: Normal ☒ Abnormal ☐ Ridge ☐ Other ____

LVOT Vel: Normal ☒ Abnormal ☐ ____ m/s

AoV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐

AoV Vel: Normal ☒ Abnormal ☐ (Apical ☒ Subcostal ☐) 1.1 m/s

AR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ ____ m/s

RVOT: Normal ☒ Infundibular narrowing ☐ Vmax (if abnormal) ____ m/s

RVOT Vel: Normal ☒ Abnormal ☐ ____ m/s

PV: Normal ☒ Abnormal ☐ Mild ☐ Moderate ☐ Severe ☐

PV Vel: Normal ☒ Abnormal ☐ (Right ☒ Left apex ☐) 1.3 m/s

Comments ____

Genetic Test Status Test: ____

Negative ☐ Abnormal: Heterozygous ☐ Homozygous ☐

ELECTROCARDIOGRAM ☐ NOT PERFORMED

Date: ☐ normal ☐ abnormal

HR: ____ Method: ____

Rhythm:

EXAMINATION RESULTS

NORMAL (CHECK ALL THAT APPLY)

☒ No evidence for congenital heart disease

☒ No evidence for adult-onset inherited heart disease **Valid for 1 year**

☐ Holter monitor required within 90 days for final clearance (see back of white form for additional information)

EQUIVOCAL (CHECK ALL THAT APPLY)

☐ Congenital heart disease cannot be definitively diagnosed nor excluded

☐ Adult-onset inherited heart disease cannot be definitively diagnosed nor excluded

ABNORMAL (CHECK ALL THAT APPLY)

☐ Evidence of congenital heart disease

☐ Evidence of adult-onset inherited heart disease

Diagnosis: ☐ ARVC ☐ ASD ☐ DCM ☐ MVD ☐ MMVD ☐ PDA ☐ PS ☐ SAS/AS ☐ TVD ☐ VSD ☐ Other ☐ Arrhythmia

Severity: ☐ Mild ☐ Moderate ☐ Severe

Comments (additional findings which would not result in a final abnormal diagnosis):

☒ **I DID** verify microchip/tattoo on this dog

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

☐ **NO MICROCHIP/TATTOO PRESENT**

Signature: [signature] Date: 4/6/25

Diplomate ACVIM (American College of Veterinary Internal Medicine – Cardiology), or Diplomate ECVIM (European College of Veterinary Internal Medicine – Cardiology)

WHITE = Owner/OFA Registration copy
PINK = Diplomate copy
YELLOW = Research copy