## BRITISH VETERINARY ASSOCIATION/KENNEL CLUB HIP DYSPLASIA SCHEME

To: British Veterinary Association 7 Mansfield Street, London W1G 9NQ Telephone: 020 7908 6380

21 - 212733

THE ORIGINAL OF THIS CERTIFICATE IS GREEN

Section A - TO BE COMPLETED B	Y OWNER/AGENT	KC Re	gistered Nu	umber E N 5 0 9 9 9 0 0 1	
KC Registered Name WIC	CIZZIA			1k	
KC Registered Name	41686	b a d			
Breed Mindline Amer	ican sh	ephera	Sex MA	1E Date of birth 25 / 8 / 20 /	
Name of owner GEOFFICE	es peans	_	Address	MUORHENS, THE GREEN SHIPDHA	
				Post code 1/25 7LA	
0: 1 = 0 0 0 0 0 0	DOR HALL	14	Dom: 1	WIGGIEBUTT FIINT	
Sire: LEGACY'S		Daill.	N37379902 09-15		
DN46431201	12-17		DN	13+5+1102	
(d) I give permission for the result     (e) I give permission for the result     (f) I understand that once the subprocess     (g) I understand that the personal     7 years for accounting purpose	rect and relate to year old and has the certificate to ts of the examinates to be published omission has bee	the dog subn not previous be sent to th tion to be use and included n received by	nitted for rad ly been scor e geneticist i ed at a future d on the rele v the Canine f the scheme	liographic examination red under this Scheme retained by the breed society or other representative bod e date for the purpose of statistical research	
Owner's/Agent's signature				Date	
Section B – TO BE COMPLETED B (Section A must be completed in full before		ERINARY SURG	EON	· ·	
Microchip/Tattee no. 9 5 3	0100	002	376	377. Microchip/ <del>Tattoo</del> confirmed	
I certify that the radiograph relating and in conformity with the provision	ns of the Hip Dys	plasia Schen	ne Procedure	e Notes.	
Veterinary surgeon submitting r	radiograph (BLO	CK CAPITAL	S) Mar	0.000	
Address KNOTTS YARI	) UETS,	GR IST	on K	CAD, WATTON, NORFOLK	
				Post code 1925 6DL.	
Veterinary Surgeon's Signature	Marcust	Wilse		#/MRCVS Date 18 / 11 / 202	
Veterinary eargeon o eignaturo			S-22-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
Please submit the correct fee	e for the radiogr	aph to be pr	ocessed (cr	heques payable to BVA.) For current fees contact BVA	
Section C - TO BE COMPLETED B	BY SCRUTINEERS				
		TFICAT	E OF	SCORING	
HIP JOINT	Score Range	Right	Left		
Norberg angle	0-6	2	2		
Subluxation	0-6	2		NB The scores represent the opinion of th	
Cranial acetabular edge	0-6	2.	2	BVA appointed scrutineers for the radiograp submitted. The lower the score, the les	
Dorsal acetabular edge	0-6		1	evidence of hip dysplasia present. Pleas	
Cranial effective acetabular rim	0-6			consult the current procedure notes an breed mean score sheet for relevant detail	
Acetabular fossa	0-6			detail (available from BVA)	
Caudal acotabular adde	0-5			,	

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

0-6

(max possible 53 per column)

Date 1 5 DEC 2021

Total score (max possible 106)

Signed 22

Femoral head/neck exostosis

Femoral head recontouring

**TOTALS** 

F/MRCVS Signed

F/MRCVS 03/18

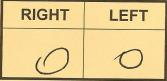
## BRITISH VETERINARY ASSOCIATION/KENNEL CLUB ELBOW DYSPLASIA SCHEME

To: British Veterinary Association 7 Mansfield Street, London W1G 9NQ 1 - 2 1 2 7 3 3 Telephone: 020 7908 6380

THE ORIGINAL OF THIS **CERTIFICATE IS GOLD** 

Section A - TO BE COMPLETED BY OWNER/AGENT		KC Regis	stered Number E N 5 0 9 9 9 0 0 1
KC Registered Na	me WIGGIEBOTT	CHAI	ve_
Breed MINIAT	ULE AMBRICAN SHE	PHARD .	Sex MALE Date of birth 25 / 08 / 17
Name of owner	EOFFREY PLANK	Α	Address MOORNERS THE CREEN SMILDHA
			Post code 1875 7-A
Sire: LEGAC	415 SPARHANK		Dam: WIGGIEBUTT FLINT
DN464:	31201 12-17		DN 3737 9902 09-15
<ul> <li>(a) The particulars</li> <li>(b) This dog is a n</li> <li>(c) I give permissi</li> <li>(d) I give permissi</li> <li>(e) I give permissi</li> <li>(f) I understand the process</li> <li>(g) I understand the</li> </ul>	s above are correct and relate to the ninimum of one year old and has no on for a copy of the certificate to be on for the results of the examinatio on for the results to be published a nat once the submission has been not the personal information provide ounting purposes on an electronic second	e dog submitte ot previously be sent to the gent to the gent to be used a lind included on received by the das part of the system. My per	een graded under this Scheme eneticist retained by the breed society or other representative body t a future date for the purpose of statistical research
Microchip/Tattoo n  I certify that the rad and in conformity w	iographs relating to the dog identifi ith the provisions of the Elbow Dys	ed above were splasia Scheme	A dicrochip/Tattoo confirmed with taken on the following date 18 / 11 / 21 exprocedure Notes.
Veterinary surgeon	n submitting radiographs (BLOC	K CAPITALS)	MARCUS J. WILDN
	s Signature Maray Th		Post code 18 1 11 1 2021
Please submit tl	ne correct fee for the radiograph	s to be proce	ssed (cheques payable to BVA.) For current fees contact BVA
	E COMPLETED BY SCRUTINEERS  CERTIF		OF GRADING
CDADE	RIGHT LEFT		NB The grades are based on a flexed lateral and neutral lateral

(range 0-3)



**OVERALL GRADE** (max possible 3)



of each elbow and represent the opinion of the BVA appointed scrutineers for the radiographs submitted. The lower the grade, the less evidence of elbow dysplasia present. The overall grade given for both elbows is that given to the elbow with the highest grade. Please consult the current procedure notes for relevant details (available from BVA)

2 2 DEC 2021

WE HEREBY CERTIFY that the grade of the radiographs submitted for the dog identified above was produced using the grading criteria of the BVA/Kennel Club Elbow Dysplasia Scheme

**基DEC 2021** 

Signed

Signed

F/MRCVS

2 2 DEC 02021

10.30

	CANINE HEALTH SCH	IEMES EYE EXAMINATION O	ERTIFICATE	
Pet name CHALK	KC no.		nip no. 9530100	0237637
KC registered name WIG	GLEBUTT CHA	4 1 /	ate of previous examination	00/2/17
SHEPHERD 1.2 N	ENIGER-BARG	MELONSKA, MOC	XHENS, THE GR	
Owner's telephone number 075	72395779	Owner's email address INOISM	reiniger@gm	ail. cau IPZS
Vet's name and address	3115 MARCO, V	Vet's email address		
Vet's telephone number  I hereby declare that the dog submitte	d for examination under the BVA/KC/ISI and may be published. Any appeal agai	OS Canine Health Scheme is the on	e described above and that the info	ormation obtained may be
I understand and agree that the use of ADXHIMETACAINE will Lundersfand that the personal information		nister the eye examination service ar	ate a complete examination of the o	eye and that a local anaesthe
	EXAMINATI	ON OF THE EYE AND ADNE	(A	
Mydriatic Ophthalmoscopy Direct	Indirect Biomicroscopy	Onioscopy Tonometry	Other	
Parts Examined: Adnexa Corn	ea Drainage Angle ris	LEFT /	Comments NO BREED	RELATED ADNEXA
			OR OCULA	RCONDITIONS
PA	LENS (	A P		
0	FUNDUS	0	DNA sample taken on this date: I confirm that the scanned microor matches the number on the certiful Information for owners/Appeals leads to the confidence of the confidence	ficate
	INHERIT	ED EYE DISEASE STATUS		
This section applies to the known inherite  CONGENITAL/NEONATAL	d ocular conditions specified in the Proced  CLINICALLY  CLINICALLY  UNAFFECTED  AFFECTED		ONCENITAL	CLINICALLY CLINICALLY INAFFECTED AFFECTED
(CEA) Collie eye anomaly  - Choroidal hypoplasia  - Coloboma  (MRD) Multifocal retinal dysplasia  (TRD) Total retinal dysplasia  (CHC) Congenital hereditary cataract  (PHPV) Persistent hyperplastic primary vi  (PLA) Pectinate ligament abnormality	treous	(HC) Hereditary cataract (PLL) Primary lens luxatio (POAG) Primary open angle (IOP) Intraocular press (PRA) Progressive retinal (RPED) Retinal pigment ep  'Clinically affected' signifie the inherited disease(s) spe	on glaucoma ure R mmHg L mmHg atrophy thelial dystrophy s that there is evidence of cified, whereas 'Clinically	
	ppy Grading Result: I, 1 = mildly affected, 2 = moderately affec	unaffected' signifies that the ted, 3 = severely affected.	ere is no such evidence.	
Clinically affected with ocular conditions n	ot currently specified in the Procedure Not	es.		
Distichiasis Ectopic cilia Trichiasis Entropion Ectropion Combined entropion/ectropion Multi-ocular defects Corneal lipid deposition	Persistent pupillary membrane Ocular Melanosis Pectinate ligament abnormality Lens luxation Anterior Capsular Cataract Anterior Cortical Cataract Perinuclear Cataract Nuclear Cataract	Posterior Cortical Cataract Posterior Polar Subcapsular Ca Posterior Capsular Cataract PHPV Optic nerve hypoplasia Posterior segment coloboma Choroidal hypoplasia MRD-like appearance	GPRA-like appea RPED-like appea Other conditions	rance
I have today examined the animal describ	above under the BVA/KC/ISDS Eye Sc			- lo:
Signature of Panellist	Name_		A Tacting which is valid for 3 vac	•
i / Inis certii	icate is valid for 12 months from date o	ı sıyrıature witn tne exception of P	LA resurig, which is valid for 3 year	3

AMERICAN KENNEL CLUB

NAME

WIGGLEBUTT CHALK

WIGGELDOTT OF IAL

EPSTEST STATEST STATES

BREED

MINIATURE AMERICAN SHEPHERD

COLOR

BLUE MERLE, WHITE MARKINGS, TAN POINTS

SIRE

LEGACY'S SPARHAWK DN46431201 12-17

DAM

WIGGLEBUTT FLINT DN37379902 09-15

BREEDER

ANGELA OGLE & BILL OGLE & INA ZWEINIGER-BARGLELOWSKA

OWNER

INA ZWEINIGER-BARGLELOSKA MOORHENS THE GREEN SHIPDHAM

THETFORD NORFOLK IP257LA

ENGLAND

KC/BVA/ISDS Eye Examination Scheme Sign**Jc** Date<sup>12</sup>/12/17 For results see Certificate

NUMBER

DN50999001

SEX

MALE
DATE OF BIRTH
AUGUST 25, 2017

PROUDLY BRED BY AN AKC BREEDER OF MERIT



American Kennel Club

CERTIFICATE ISSUED NOVEMBER 7, 2017

This certificate invalidates all previous certificates issued.

If a date appears after the name and number of the sire and dam, it indicates the issue of the Stud Book Register in which the sire or dam is published.

For Transfer Instructions, see back of Certificate.

This Certificate issued with the right to correct or revoke by the American Kennel Club.

REGISTRATION CERTIFICATE