

VETERINARY CERTIFICATE OF HEART TESTING

Performed for screening purposes at the request of breed clubs, in association with the Veterinary Cardiovascular Society and in agreement with the RCVS

SECTION A (to be completed by owner) - please press firmly when writing

Breed: BLOODHOUND	Pet name of dog: VERA		
Registered name of dog: WYCHWAY-CROWN'S GHILLIE GINS ISLAND AT CULSALMOND			
Date of birth: 9/11/22	Sex (D/B): B	Colour: B + T.	Reg. No.: BA0921393
Sire: WYCHWAY'S DAWGONE TERRIFIC.		Microchip No. 991001005335487	
Dam: WYCHWAY'S OF QUARTZ SHE'S WORTH IT		Microchip checked (cardiologist please initial) dh	

Your pet's veterinary surgeon

Owner's name and address

Name:
Address:

Name: MRS D + MRS I CRUICKSHANK
Address: MOSSIDE CROFT
CULSALMOND, INSH
AB52 6UE.

- I certify that the dog presented for examination today is the dog identified above.
- I agree to this information being used (in confidence) by veterinary surgeons or geneticists researching into the problem of heart murmurs and heart disease in dogs.
- In certain breeds where a heart testing scheme is established, I agree to the information being collated by a nominated person, committee or breed council (where applicable) and published according to breed guidelines.

Signed (Owner):	Date: 27/7/24
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SECTION B (to be completed by cardiologist)

I have today, 27/7/24,	examined the dog identified to me as above.
Conditions for auscultation:	Degree of dog's movement fairly still <input checked="" type="checkbox"/> fidgety <input type="checkbox"/> restless <input type="checkbox"/>
	Degree of stress/excitement minimal <input checked="" type="checkbox"/> slight <input type="checkbox"/> moderate <input type="checkbox"/>
	Amount of respiratory noise minimal <input checked="" type="checkbox"/> slight <input type="checkbox"/> moderate <input type="checkbox"/>
	Room (background) noise minimal <input checked="" type="checkbox"/> slight <input type="checkbox"/> moderate <input type="checkbox"/>
X = No & ✓ = Yes	
<input checked="" type="checkbox"/> I could not detect the presence of an obvious heart murmur in this dog at the time of examination (0/6)	
<input checked="" type="checkbox"/> I detected a murmur of grade /6 intensity*. Please refer to individual breed club/council recommendations.	
Range: _____ PMI: _____ Radiation: _____ RHS <input type="checkbox"/> TI <input type="checkbox"/>	
Heart rate: _____ Rhythm: _____ Ectopics? <input type="checkbox"/> Precordium: _____	
<input checked="" type="checkbox"/> Further investigation into the cause of the murmur by means of Doppler echocardiography is recommended if a definitive diagnosis of the cause of the murmur is required and to provide a prognosis.	
<input checked="" type="checkbox"/> This dog is a puppy; it should be re-checked when over 12 months of age.	
<input checked="" type="checkbox"/> This dog is a breed that should be checked annually.	
<input checked="" type="checkbox"/> I found evidence of another heart abnormality (Comment):*	
<input checked="" type="checkbox"/> Electrocardiography was performed and was: NORMAL <input type="checkbox"/> / ABNORMAL <input type="checkbox"/> / EQUIVOCAL <input type="checkbox"/> / (Comment):*	
<input checked="" type="checkbox"/> 2D / M-Mode / Doppler (Delete as applicable) Echocardiography (cardiac ultrasound) was performed and was: NORMAL <input type="checkbox"/> / ABNORMAL <input type="checkbox"/> / EQUIVOCAL <input type="checkbox"/> / (Comment):*	
* Your veterinary surgeon is welcome to contact the veterinary cardiologist for further details about these findings.	

Cardiologist: Dr Laura Hamilton BVM&S
Address: PgC(SAC) PgC(SAM) MRCVS
Animals 1st Vets, Unit 19 Macmerry
Ind Estate, Macmerry, Scotland
EH33 1RD 01875 824400
laura@animals1st.co.uk

Signed: *Laura Hamilton*
Qualification: CertSAC/CertVC/DVC/RCVS Specialist/MRCVS
(Encircle as appropriate)
Date: 27/7/24

Copies: white - owner, blue - research collation, yellow - cardiologist, pink - primary veterinarian