

Office Use Only

APPL _____

RAD _____

CK _____



Orthopedic Foundation for Animals

2300 E Nifong Blvd, Columbia, MO 65201
 Phone (573) 442-0418 | Fax (573) 875-5073
 Email: ofa@offa.org | Website: www.ofa.org
 A Not-for-Profit Organization

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Application for Hip/Elbow Dysplasia Database

Registered name: GOSSIP GIRL V. RACHIELIA "JOY"			AKC registration number: TS45713301		Other registration # (if any) NHSB:3161110	
Breed: CAVALIER KING CHARLES SPANIEL TOY			Sex: F		Date of birth (MM/DD/YY): 05/23/2019	
Microchip/tattoo: 528140000762292			Registration number of sire: UR23653401		Registration number of dam: UR28462601	
Owner name: GAYLE REARDON			<div style="display: flex; align-items: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 5px;">VETERINARIAN INFORMATION</div> <div> Examining veterinary clinic: HORIZON PET CARE Mailing address: 1100 E HOLLY BLVD City: BRANDON State: SD Zip/postal code: 57005 Phone: (605) 582-8445 Fax: 605-582-7704 Veterinarian e-mail: HORIZONPETCARE@ALLIANCECOM.NET </div> </div>			
Co-owner name:						
Mailing address: 205 E. TWIN OAKS ROAD						
City: SIOUX FALLS	State: SD	Zip/postal code: 57105				
Phone: (605) 335-3726						

Owner e-mail.

GTRDDS@AOL.COM

I hereby request the OFA to provide a hip and/or elbow evaluation of the animal described on this application. I certify that the image submitted is of this animal and that neither the pelvic nor the elbow conformation have been surgically altered. I understand that the image submitted will be retained by the OFA, understand that the image is submitted for a consensus evaluation based on the independent, professional judgment of consulting board-certified veterinary radiologists, and I hereby release the OFA from any and all liability resulting from the consensus evaluation. I understand the OFA will release all normal hip and/or elbow results for animals over 24 months to the public, and by submitting this application I agree the OFA may do so. Normal hip results are defined as a consensus evaluations of Excellent, Good, or Fair and normal elbow results are defined as consensus evaluations of Normal. Abnormal hip and/or elbow results (including borderline results) will not be released to the public unless the initials of a registered owner or authorized representative appear in the box below. **Results for Animals under 24 months will only be released and published if all criteria described on page 2 of this application have been met.** By submitting this hip and/or elbow application I agree to the associated current OFA evaluation fees and understand that no results will be released or reported until all related charges are paid in full.

Signature of owner or authorized representative

Authorization to Release Abnormal Results

I hereby authorize the OFA to release the results of its evaluation of the animal described on this application to the public if the results are abnormal _____ (initials of registered owner or authorized representative).

Veterinary Information

This animal was restrained using: ☒ Physical restraint only

☐ Chemical restraint

☒ I DID verify the microchip/tattoo information on this dog

☐ I DID NOT verify the microchip/tattoo information on this dog

Only dogs with Verified Permanent Identification (VPI) will have their results transmitted to the AKC for inclusion in their registration and pedigree documents

Veterinarian Signature

Fees

Animals Over 24 Months

- Hip evaluation.....\$45.00
- Elbow evaluation.....\$45.00
- Hip and elbow evaluations submitted together.....\$50.00
- Litter of 3 or more submitted together.....\$120.00

Animals Under 24 Months

- Preliminary hip evaluation.....\$35.00
- Preliminary elbow evaluation.....\$35.00
- Preliminary hip and elbow evaluations submitted together.....\$40.00
- Litter of 3 or more submitted together.....\$100.00

Kennel Rate—Individuals submitted as a group, owned/co-owned by same person, < or > 24 months

- Minimum of 5 individuals.....\$25 per study

See instructions on page 2