



Orthopedic Foundation for Animals

2300 E Nifong Blvd, Columbia, MO 65201-3806

Phone: (573) 442-0418; Fax: (573) 875-5073

www.ofa.org, A not-for-profit organization

Call name:	Kara	Coat Color:	White br bl
Registered name:	Brookwood Kara Rose		
Breed:	Bernese Mt Dog	Sex:	F
ID Number (if any):	☐ Tattoo ☒ Microchip		
Registration Number:	900263002817387		
Registration Number:	W586453205		
Date of Birth (mm/dd/yy):	Date of Exam (mm/dd/yy):		
03/20/25	06/27/26		

Owner Name:	Jaime Conway		
Co-Owner Name:	Connie Keener		Phone:
Owner Address:	161 Silverford Heights Rd		
City:	PA	State:	Zip/postal code:
MT Union			17066

E-Mail (use both lines if needed):
jaime-conway21@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 ophthalmologist 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 of owner or authorized agent/representative

I hereby authorize the OFA to release the results of the evaluation of the animal described on this application to the public if the results are non-passing (initials)

☒	I DID verify microchip/tattoo on this dog
☐	I DID NOT verify microchip/tattoo on this dog
☐	NO MICROCHIP/TATTOO PRESENT

I certify that I have performed this ophthalmic examination using pharmacological mydriasis, ophthalmoscopy, and biomicroscopy.

Signature	ACVO #	Date
[Signature]	544	6-27-26
Diplomate, American College of Veterinary Ophthalmologists		

FEES AND CREDIT CARD INFORMATION ON THE BACK OF THE WHITE (OWNER) COPY



Companion Animal Eye Registry (CAER)

RIGHT EYE	GLOBE	LEFT EYE
☐	microphthalmos	☐
☐	keratoconjunctivitis sicca	☐
☐	glaucoma	☐
EYELIDS		
☐	entropion	☐
☐	ectropion	☐
☐	distichiasis	☐
☐	ectopic cilia	☐
☐	imperforate lacrimal punctum	☐
NICTITANS		
☐	cartilage anomaly/eversion	☐
☐	gland prolapse	☐
☐	plasmoma/atypical pannus	☐
CORNEA		
☐	dystrophy — epithelial/stromal	☐
☐	dystrophy — endothelial	☐
☐	pannus	☐
☐	pigmentary keratitis/keratopathy	☐
UVEA		
☐	uveal cyst	☐
☐	iris coloboma	☐
☐	iris hypoplasia	☐
☐	pigmentary uveitis	☐
persistent pupillary membranes		
LENS		
CATARACT	Incomp. Incip. Punc. Punc. Incip. Incomp.	CATARACT
☐	anterior cortex	☐
☐	posterior cortex	☐
☐	equatorial cortex	☐
☐	anterior sutures	☐
☐	posterior sutures	☐
☐	nucleus	☐
☐	capsular	☐
☐	generalized/complete	☐
☐	resorbing/hypermature	☐
☐ Significance Unknown/Suspect Not Inherited		
☐	posterior Y-suture tip opacities	☐
☐	subluxation/luxation	☐
VITREOUS		
☐	Grades 2-6 Grade 1 PHPV/PHTVL Grade 1 Grades 2-6	☐
☐	persistent hyaloid artery	☐
degeneration		

Ophthalmologist Name:	Kara Gornik, DVM, DACVO		
Ophthalmologist Address:	PVSEC - Ophthalmology		
City:	807 Camp Horne Road	State:	Zip/postal code:
Phone:	Pittsburgh, PA 15237		
Email:	412-366-3400		

RIGHT EYE	FUNDUS	LEFT EYE
☐	retinal detachment	☐
☐	retinal atrophy—generalized	☐
☐	CMR/CMR-like retinopathy	☐
☐	other presumed inherited retinopathy	☐
retinal dysplasia		
☐	choroidal hypoplasia	☐
☐	coloboma	☐
☐	optic nerve coloboma	☐
☐	optic nerve hypoplasia	☐
☐	micropapilla	☐
OTHER CONDITIONS		
☐	Unlisted conditions suspected as inherited. Describe in comments	
☐	Unlisted conditions suspected as not inherited	

NORMAL	
Comments	