

NATIONAL ROTTWEILER COUNCIL [AUSTRALIA] – Hip AND ELBOW DYSPLASIA REPORT

Return completed form to: _____

001697

PLEASE TYPE OR USE BLOCK CAPITALS FOR ALL INFORMATION

Dog's Registration No: 494978	Date of Birth 14.07.2010
Tattoo No. /Microchip No: 941000011920756 ✓	Sex: MALE
Dog's Registered Name: ROTSDALE IRISH CONNECTION	Date Radiograph Taken: 13/10/11

Name of Owner: SUE BOESENBERG
 Address: PO BOX 1712 GERALDTON WA 6531

PEDIGREE DETAILS MUST BE INSERTED

Sire: INT. CH; GERCH, WDCH ASTOR VON JUNIPERA (HR14902 RW) (SERB)	Dam: CH HANBAR ELEKTRA AT ROTSDALE (KW10) (X55965)
PGS: WARRO VON HAUSE SOMMER (JR 86247) (SERB)	MGS: ORLANDO VOM HAUSE NEWBRAND (VDH 103449) (GER)
PGD: VOIGA OD DRAGICEVICA (JR 85442) (SERB)	MGD: G.B CH HANBAR NULA (Z1665301) (Z02) (GB)

I hereby declare that:

- (a) The particulars above are correct and relate to the dog submitted for radiographic examination.
- (b) The dog has not previously been submitted for scoring.
- (c) I give permission for the results of the examination to be used at a future date for the purpose of statistical research.

Owner's signature: [Signature] Date: 13-10-11

Veterinary Surgeon submitting (a) Hip Radiograph of anaesthetized dog (b) Elbow Radiograph (c) Both. (Please indicate)

Name: Dr Ross Staaden
 Address: 14 Runyon Rd, Midvale

Tattoo Number has been checked and recorded on the x-ray plate. (Y/N)
 Microchip Number has been checked and recorded on the x-ray plate. (Y/N)

Date: 13/10/2011 Signed: [Signature]

Film Quality: Satisfactory; Underexposed; Overexposed; Extraneous marks.
 Positioning: Satisfactory; Tilted Laterally Left/Right; Femora not sufficiently extended; Femora not evenly extended.

Hip Joint	Right	Left	Comment
Norberg Angle	69	69	697
Subluxation	0	0	
Cranial Acetabular Edge	0	0	
Dorsal Acetabular Edge	0	0	
Cranial effective Acetabular Rim	0	0	
Acetabular Fossa	0	0	
Caudal Acetabular Edge	0	0	
Femoral Head/Neck Exostosis	0	0	
Femoral Head Recontouring	0	0	
Total	14	3	Total = 17

HIP GRADING 5 ELBOW GRADE Right 0 B1 2 3 (1 mm) Left 0 B1 2 3 (8 mm)

Date submitted for examination: 14/10/11 Date Returned: 17/11/11 Date Examined: 18/10/11

Signature of the reader: [Signature]

Name of the reader: DR. JENNIFER RICHARDSON BMS, FACVSc (Radiol)

Radiograph clearly labelled with: Tattoo Number Y/N Microchip Number Y/N Dog's Registration Number Y/N

Owners Copy