

# NATIONAL ROTTWEILER COUNCIL (AUSTRALIA) – HIP AND ELBOW DYSPLASIA REPORT

Return completed form to: Susie Baird - Po Box 1102 GROVEDALE DC 3216 VIC

(RCSA)

004065

**PLEASE TYPE OR USE BLOCK CAPITALS FOR ALL INFORMATION**

**PAPERWORK NUMBER MUST BE EMBOSSED ON X-RAYS**

Dog's Registration No.: <u>3100355011</u>	Date of Birth: <u>10/03/17</u>
Tattoo No. / Microchip No.: <u>956000005339698 ✓</u>	Sex: <u>FEMALE</u>
Dog's Registered Name: <u>UBERSEIN TALLAHASSEE LASSIE ✓</u>	Date Radiography Taken: <u>5.12.18 ✓</u>

Name of Owner: ~~Susie Baird~~ S. BOESENBERG, K. NIXON, L RUSSELL

Address: ~~Po Box 1102 Grovedale DC 3216 VIC~~  
PO BOX 621 HOMPITY DOO NT 0836

**PEDIGREE DETAILS MUST BE INSERTED**

Sire: <u>BLICKSCHARF THE SCOUNDREL</u>	Dam: <u>UBERSEIN SAY YOU LOVE ME</u>
PGS: <u>UBERSEIN VENI VIDI VICI</u>	MGS: <u>UBERSEIN DOMINATION</u>
PGD: <u>BLICKSCHARF KESSI</u>	MGD: <u>KINGSAHL NICOS NEMESIS</u>

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: 4/12/18

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

Name: K R SMITH

Address: University Ave Vet Hospital, 66 University Ave, Durack, NT, 0830

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

Date: 5.12.18 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	<u>1</u>	<u>1</u>	<u>102°/104°</u>
Subluxation	<u>2</u>	<u>2</u>	
Cranial Acetabular Edge	<u>1</u>	<u>2</u>	
Dorsal Acetabular Edge	<u>1</u>	<u>0</u>	
Cranial effective Acetabular Rim	<u>0</u>	<u>0</u>	
Acetabular Fossa	<u>0</u>	<u>0</u>	
Caudal Acetabular Edge	<u>0</u>	<u>0</u>	
Femoral Head/Neck Exostosis	<u>1</u>	<u>0</u>	
Femoral Head Recontouring	<u>0</u>	<u>0</u>	
Total	<u>5</u>	<u>7</u>	<u>12</u>

HIP GRADING 2 ELBOW GRADE Right 0 B 123 (1.8mm) Left 0 B 123 (2.5mm)

Date submitted for examination: 17/12/18 Date Returned: 18/12/18 Date Examined: 17/12/18

Signature of the reader: [Signature]

Name of the reader: DR. JENNIFER RICHARDSON

Radiography clearly labelled with: Tattoo No.: Y/N Microchip No.: Y/N Dog's Registration No.: Y/N Paperwork No.: Y/N

White: NRCA Breed Recorder Original Pink: Owner's Copy Blue: NRCA Breed Recorder Copy Yellow: State Club Copy