



Orthopedic Foundation for Animals
2300 E Nifong Blvd, Columbia, MO 65201-3806
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www.ofa.org, A not-for-profit organization

Application for Advanced Cardiac Database

Performed in association with the Orthopedic Foundation for Animals (OFA)
and the American College of Veterinary Internal Medicine-Cardiology (ACVIM)



Registered name:	
Stumptown Coons Esther	
Call name:	Esther
Breed:	MCO
Sex:	Female
Registration #:	
Registration Number:	AKC ☐ Other ☐
ID Number (if any):	☐ Tattoo ☒ Microchip
941000030096961	
Date of Birth: (MMDDYY)	12-21-24
Date of Exam: (MMDDYY)	

EXAMINATION FINDINGS	
AUSCULTATION (REQUIRED)	
Normal ☒ Abnormal ☐	Arrhythmia ☐
Murmur Grade: I ☐ II ☐ III ☐ IV ☐ V ☐ VI ☐	
PMI: Left ☐ Right ☐ Base ☐ Apex ☐	
Timing: Systolic ☐ Diastolic ☐ Continuous ☐	
Extra Sounds: Click ☐ Gallop ☐ Split S1 ☐ Split S2 ☐	
ECHOGRAPHY (REQUIRED)	
RV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐	mm
RA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐	mm
LV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐	mm
LVIDd: 2.2 mm	LVIDsn: mm
LVIDs: 6.4 mm	LVIDsn: mm
LV EDVI (2D): 47 mL/m ²	LV ESVI (2D): mm
SF: 47 % (MM 2D)	EF (2D volumetric): 85 %
IVS: 4.7 mm	Normal ☒ Abnormal ☐ (MM 2D)
PW: 2.2 mm	Normal ☒ Abnormal ☐ (MM 2D)
LA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐	mm
LAd: 2.5 mm	SAX ☐ LAX ☒ (MM 2D) EPSS: mm
Ao Diameter: mm	LA/Ao: mm
TV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐	Method: mm
TR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐	Vel: mm/s
MV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐	Vel: mm/s
MR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐	Vel: mm/s
LVOT: Normal ☒ Abnormal ☐ Ridge ☐ Other ☐	mm
LVOT Vel: Normal ☒ Abnormal ☐	mm/s
AoV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐	mm/s
AoV Vel: Normal ☒ Abnormal ☐ (Apical/Subcostal) 0.79 m/s	mm/s
AR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐	mm/s
RVOT: Normal ☒ Infundibular narrowing ☐ Vmax (if abnormal) mm/s	mm/s
RVOT Vel: Normal ☒ Abnormal ☐	mm/s
PV: Normal ☒ Abnormal ☐ Mild ☐ Moderate ☐ Severe ☐	mm/s
PV Vel: Normal ☒ Abnormal ☐ (Right/Left apex) 0.78 m/s	mm/s
Comments	
Genetic Test Status: Test: _____	
Negative ☐ Abnormal: Heterozygous ☐ Homozygous ☐	

Signature of owner or authorized agent/representative

I hereby authorize the OFA to release equivocal or abnormal results to the public. (Initials) _____

Cardiologist Name:	NOVA SHEERAN
Phone #:	360 635 5302
E-Mail (use both lines if needed):	CASHER@OFA.ORG
Cardiologist Name:	NOVA SHEERAN
Phone #:	360 635 5302
E-Mail (use both lines if needed):	CASHER@OFA.ORG

Fees and credit card information on back of WHITE sheet.



ELECTROCARDIOGRAM		NOT PERFORMED	
Date:	Method:	☒ normal	☐ abnormal
HR:			
Rhythm:			
EXAMINATION RESULTS			
NORMAL (CHECK ALL THAT APPLY)			
☒ No evidence for congenital heart disease			
☐ No evidence for adult-onset inherited heart disease			
☐ Holter monitor required within 90 days for final clearance (see back of white form for additional information)			
EQUIVOCAL (CHECK ALL THAT APPLY)			
☐ Congenital heart disease cannot be definitively diagnosed			
☒ Adult-onset inherited heart disease cannot be definitively diagnosed			
ABNORMAL (CHECK ALL THAT APPLY)			
☐ Evidence of congenital heart disease			
☐ Evidence of adult-onset inherited heart disease			
Diagnosis:	☐ ARVC ☐ ASD ☐ DCM ☐ MVD ☐ MMVD ☐ PDA ☐ PS ☐ SAS/AS ☐ TVD ☐ VSD ☐ Other ☐ Arrhythmia		
Severity:	☐ Mild ☐ Moderate ☐ Severe		
Comments (additional findings which would not result in a final abnormal diagnosis):			
PATIENT TOO YOUNG FOR SCREENING- FOR ADULT-ONSET HEART DISEASE			

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

Signature	Date
8/2	6/7/25

Diplomate ACVIM (American College of Veterinary Internal Medicine - Cardiology), or Diplomate ECVM (European College of Veterinary Internal Medicine - Cardiology)
WHITE = Owner/OFA Registration copy
PINK = Diplomate copy
YELLOW = Research copy
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