Orthopedic Foundation for Animals
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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)

ACVIM American College of Veterinary Internal Medicine

Registered name: ~~Bastetexotics Exv of Breeze~~ Breezebengals Minnie Bengals
Call name: Minnie
Weight: ☐ kg ☐ lbs ☐ Estimate
Breed: Bengal
Gender: F
Sire Registration #: SBT 082917 005
Dam Registration #: SBT 033119 012
ID Number (if any): ☐ Tattoo ☐ Microchip: 952000001314867
Registration Number: ☐ AKC ☐ Other: SBT02072107 9
Date of Birth: (MMDDYY) ~~040918~~ 02/07/21
Date of Exam: (MMDDYY) 08 20 2022
Owner Name: Sabrina Hewer
Co-Owner Name:
Phone: 780-5125483
Owner Address: 10103 Saxony Rd
City: County of Grande Prairie
State: AB
Zip/postal code: T8V 0G4
E-Mail (use both lines if needed): BreezeBengals@gmail.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 cardiologist 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 equivocal or abnormal results to the public. (initials) _____

Cardi
Phon Dr. Kim Hawkes, DACVIM (Cardiology)
Pulse Veterinary Specialists & Emergency
780-570-9999 **CH08**
E-Mai cardiology@pulseveterinary.ca

Fees and credit card information on back of WHITE sheet.
12/22/15

C122064

Genetic Test Status: Test_____
Negative ☐ Abnormal: Heterozygous ☐ Homozygous ☐

EXAMINATION FINDINGS

AUSCULTATION

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 ☐

ECHOCARDIOGRAM ☐ NOT PERFORMED

RA: Normal ☒ Enlarged____mm **RV:** Normal ☐ enlarged_____mm
TV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐
TR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ *Vel.* ____*m/s*

LA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐
LAd 10.1 mm: SAx ☒ LAx ☐ (MM ☐ 2D ☒)
MV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐
MR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ *Vel.* ____*m/s*
LV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐
LVIDd: 15.6 mm MM ☐ 2D ☒ **LVIDs:** 10.8 mm MM ☐ 2D ☒
SF: 31 % (MM ☐ 2D ☒) **EF:**_____% (MM ☐ 2D ☐ *volumetric*)
ESVI:_____*mL/m²* Sphericity Index_____ **EPSS:**_____*mm*
IVS: *IVSd* 3.91 *mm* Normal ☒ Abnormal ☐ (MM ☐ 2D ☒)
PW: *PWd* 3.91 *mm* Normal ☒ Abnormal ☐ (MM ☐ 2D ☒)
PapMuscle: Normal ☒ Abnormal ☐
LVOT Normal ☐ Abnormal ☐ Ridge ☐ Other _____

AoV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐
Ao Diameter: 8.18 mm **LA/Ao:** 1.23 Method:_____
AoV/LVOT Vel: Normal ☒ Abnormal ☐ (*Apical* ☒ *Subcostal* ☐) 1.01 m/s
DLVOTO: ☐ *Vmax*_____*m/s* SAM: ☐
AR: None ☐ Mild ☐ Moderate ☐ Severe ☐ _____m/s

RVOT: Normal ☐ Infundibular narrowing ☐ *Vmax (if abnormal)*_____*m/s*
DRVOTO: ☐ *Vmax*_____*m/s*
PV: Normal ☒ Abnormal ☐ Mild ☐ Moderate ☐ Severe ☐
PV Vel: Normal ☒ Abnormal ☐ (Right ☒ Left apex ☐) 0.89 m/s

ELECTROCARDIOGRAM (ECG)

☐ normal ☐ abnormal ☐ not performed

Date:	Method:
HR:_____bpm	Rhythm:

HOLTER ECG

Date performed:_____ ☐ pending ☐ not performed
normal: ☐ equivocal: ☐ abnormal: ☐ *(see Holter report for details)*

EXAMINATION RESULTS

☒ **NORMAL**

☒ No evidence for congenital heart disease
☒ No evidence for adult onset inherited heart disease
Valid for 1 year *(In Dobermans and Boxers preliminary clearance only. Holter required within 3 months of today for final clearance)*

☐ **EQUIVOCAL**

☐ Congenital or adult onset inherited heart disease cannot be definitively diagnosed or excluded

☐ **ABNORMAL**
(evidence of congenital or adult onset inherited heart disease)

Diagnosis: ☐ ARVC ☐ ASD ☐ DCM ☐ HCM ☐ MVD ☐ MMVD ☐ PDA ☐ PS ☐ SAS/AS ☐ TVD ☐ VSD ☐ Other _____

Severity: ☐ Mild ☐ Moderate ☐ Severe

Comments *(additional findings which would not result in a final abnormal diagnosis):*

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

Signature Date

Diplomate ACVIM (American College of Veterinary Internal Medicine – Cardiology), or Diplomate ECVIM (European College of Veterinary Internal Medicine – Cardiology)

WHITE = Owner/OFA Registration copy; PINK = Diplomate copy; YELLOW = Research copy

OFA Advanced Cardiac Clearance Database Fees

- Animals over 12 months of age $15.00
- Litter of 3 or more submitted together $30.00
- Kennel Rate—Minimum of 5 individuals submitted as a group, owned/co-owned by same person. ..... $7.50 ea.
- Submission of non-passing results in the open database: NO CHARGE

Credit Card Payment Information

Payments can be made by check, money order (U.S. funds drawn on a U.S. bank), cash, Visa, or Mastercard, payable to the Orthopedic Foundation for Animals. To pay by credit card, fill out the following information.

Visa/Master Card Number *(1 digit per cell, no dashes)*

Cardholder name:

Exp. (MM|YY) CVV

Abbreviations of diseases listed on front page

ARVC: Arrhythmogenic right ventricular cardiomyopathy
ASD: Atrial septal defect
DCM: Dilated cardiomyopathy
HCM: Hypertrophic cardiomyopathy
MMVD: Myxomatous mitral valve disease
PDA: Patent ductus arteriosus
PS: Pulmonic stenosis
SAS/AS: Subaortic stenosis/aortic stenosis
TVD: Tricuspid valve dysplasia
VSD: Ventricular septal defect

Purpose of cardiac health screening in dogs

- To identify dogs free from any cardiac abnormality
- To ascertain the prevalence of heart murmurs, abnormal rhythms or specific heart defects in specific breeds
- To confirm the cause of heart murmurs or abnormal rhythms by further investigation of affected animals
- To collate data for investigation of a possible genetic basis to a specific heart problem in a given breed
- To advise the owner, breeder and dog's veterinarian when an abnormality has been identified and recommendations about any further investigation, if indicated

Methods of heart testing

1. ***Auscultation: examination with a stethoscope***

   Auscultation allows detection of heart murmurs, the specific timing and localization as well as grading of intensity (grade 0 - 6). The heart rhythm is also assessed during auscultation. Heart murmurs occur with many congenital heart defects and adult onset inherited cardiac diseases such as myxomatous mitral valve disease (MMVD). Some common forms of congenital heart disease include subaortic stenosis (SAS), patent ductus arteriosus (PDA), pulmonic stenosis (PS) and tricuspid valve dysplasia (TVD). Abnormal heart rhythms may occur in animals without murmurs in dilated cardiomyopathy (DCM) or arrhythmogenic right ventricular cardiomyopathy (ARVC). It may be difficult for the veterinarian to detect a soft murmur in a noisy room or in a dog that is squirmy. Some murmurs may change intensity at different heart rates, after exercise or excitement.

2. ***Electrocardiogram (ECG)***

   This is always indicated if an abnormal heart rhythm is detected. It is most often used to screen certain breeds of dogs for DCM or ARVC.

3. ***Echocardiogram (with Doppler)***

   Echocardiography allows visualization the heart chambers and valves in real-time. M-mode is used for measurements to be taken and compared with normal values for breed or size of dog. Doppler is required to confirm the diagnosis of a specific type of congenital defect and to identify mildly versus severely affected animals. In some cases, it is difficult to be certain whether a dog has mild disease or an "innocent" murmur.

4. ***Holter ECG (separate report required)***

   This test is indicated in breeds predisposed to DCM or arrhythmogenic right ventricular cardiomyopathy. Affected dogs may display ventricular arrhythmias early in the disease process, when the echocardiogram does not reveal any abnormalities yet. A Holter (24h ECG) allows detection of infrequent, but significant arrhythmias.

   For final clearance a 24 hour Holter is required in Boxers and Doberman Pinschers.

Adult onset of inherited heart disease can appear at any age of an adult dog or cat. Testing for DCM, ARVC, MMVD and HCM is thus only valid for 1 year, after which time retesting is required to screen for onset of new abnormalities.