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)

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

ACVIM — American College of Veterinary Internal Medicine

Registered name: Chambrays Emperior Maximus
Ben Tank'd on the Blvd
Call name: Maxie
Weight: ☒ kg ☐ lbs ☐ Estimate
Breed: Labrador Retriever
Gender: M
Sire Registration #:
Dam Registration #:
Registration Number: ☒ AKC ☐ Other: SS193232201
ID Number (if any): ☐ Tattoo ☒ Microchip: 956000018328064
Date of Birth: (MMDDYY): 032220
Date of Exam: (MMDDYY): 110423

Owner Name: Riva Steinman
Co-Owner Name: Jay Steinman
Phone:
Owner Address: 6420 SW 135th Dr
City: Pinecrest
State: FL
Zip/postal code: 33156
E-Mail (use both lines if needed): no1mommcbellsouth.net

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 releases the OFA to release non-passing results to the public. BSS

Signature of owner or authorized agent/representative

I hereby authorize the OFA to release equivocal or abnormal results to the public. (initials) BSS

Cardiologist Name: Heidi Kellihan
Phone #: 608-263-7600
OFA Examiner #: CK 10
E-Mail (use both lines if needed):

Fees and credit card information on back of WHITE sheet.
03/01/2023

158102

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 ☐

ECHOCARDIOGRAM (REQUIRED)

RV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐ ____mm
RA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐ ____mm
LV: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐
LVIDd: 46 mm LVIDdn: ____mm (MM ☐ 2D ☐)
LVIDs: 34 mm LVIDsn: ____mm (MM ☐ 2D ☐)
LV EDVI (2D): ____ mL/m² LV ESVI (2D): ____ mL/m²
SF: 27 % (MM ☐ 2D ☐) EF (2D volumetric): ____ %
IVS: IVSd 11 mm Normal ☒ Abnormal ☐ (MM ☐ 2D ☐)
PW: PWd 11 mm Normal ☒ Abnormal ☐ (MM ☐ 2D ☐)
LA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐
LAd: 24 mm: SAx ☐ LAx ☐ (MM ☐ 2D ☐) EPSS: ____mm
Ao Diameter: 24 mm LA/Ao: 1.00 Method: ____
TV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐
TR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ Vel. ____ m/s
MV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐
MR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ Vel. ____ m/s
LVOT: Normal ☒ Abnormal ☐ Ridge ☐ Other ____
LVOT Vel: Normal ☒ Abnormal ☐ ____ m/s
AoV: Normal ☒ Abnormal: Mild ☐ Moderate ☐ Severe ☐
AoV Vel: Normal ☒ Abnormal ☐ (Apical ☐ Subcostal ☐) 0.73 m/s
AR: None ☒ Trivial ☐ Mild ☐ Moderate ☐ Severe ☐ ____ m/s
RVOT: Normal ☒ Infundibular narrowing ☐ Vmax (if abnormal) ____ m/s
RVOT Vel: Normal ☒ Abnormal ☐ ____ m/s
PV: Normal ☒ Abnormal ☐ Mild ☐ Moderate ☐ Severe ☐
PV Vel: Normal ☒ Abnormal ☐ (Right ☐ Left apex ☒) 0.70 m/s

Comments ____

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

ELECTROCARDIOGRAM ☐ NOT PERFORMED

Date: ☐ normal ☐ abnormal
HR: ____ Method:
Rhythm:

EXAMINATION RESULTS

NORMAL (CHECK ALL THAT APPLY)

☒ No evidence for congenital heart disease
☒ No evidence for adult-onset inherited heart disease **Valid for 1 year**
☐ 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 nor excluded
☐ Adult-onset inherited heart disease cannot be definitively diagnosed nor excluded

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):

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

Signature 11/4/23 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