



Kennel Union of South Africa



South African Veterinary Association



Federation Cynologique Internationale

International Hip/Elbow Dysplasia Certificate

Certificate no. R5111

NAME : BONYL KAPARLA
BREED : RETRIEVER (GOLDEN)
SEX : BITCH
REGISTRATION NUMBER : ZA005771B16
MICROCHIP NUMBER : 953010000898757
DATE OF BIRTH : 2016:01:15
DATE OF RADIOGRAPHS : 2017:07:21
OWNER : MRS L VAN DER HOVEN
 SUITE 69, PRIVATE BAG X16
 HERMANUS
 7200

CLASSIFICATION

	Left side	Right side
Hip Dysplasia	A2	A2
Elbow dysplasia	0	0

The above radiographs have been evaluated by the undersigned official scrutineer according to the guidelines of the Federation Cynologique Internationale and the International Elbow Working Group (single ML flexed view)

25 July 2017

This certificate does not imply genetic normality and is issued without any alteration

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SAVA EYE EXAMINATION CERTIFICATE SAVV OOGONDERSOEKSERIFIKAAT

F 0961

Registered Name / Registrasienaam: Bonyl Kaparla
 Reg. No. / Nr: ZA005771B16 Tattoo / Chip No / Nr: FDXB 953010000898757 Breed / Ras: Golden Retriever
 Colour / Kleur: Golden Sex / Geslag: Female Date of Birth / Geboortedatum: 15/1/16
 Owner's Name / Eienaar se Naam: Liane van der Hoven Tel: No / Nr: 7200
 Address / Adres: Earth Cottage, Manna Rose Farm, Heren-en-Areel Valley, Hermanus Postal Code / Poskode:
 Owner's Veterinary Surgeon / Eienaar se Veearts: S. Waddingham Location / Plek: Hermanus

Previous Examination / Vorige Ondersoek Yes / Ja No / Nee Date:/...../..... Veterinarian / Veearts:
 Result / Resultaat: Normal / Normaal Abnormal / Abnormaal

I hereby declare that the animal submitted today is the one described above. / Hiermee verklaar ek dat bogenoemde dier, die een is wat vandag ondersoek is

Signature / Handtekening: Date / Datum: 3/7/17
 (Owner, Agent / Eienaar, Agent)

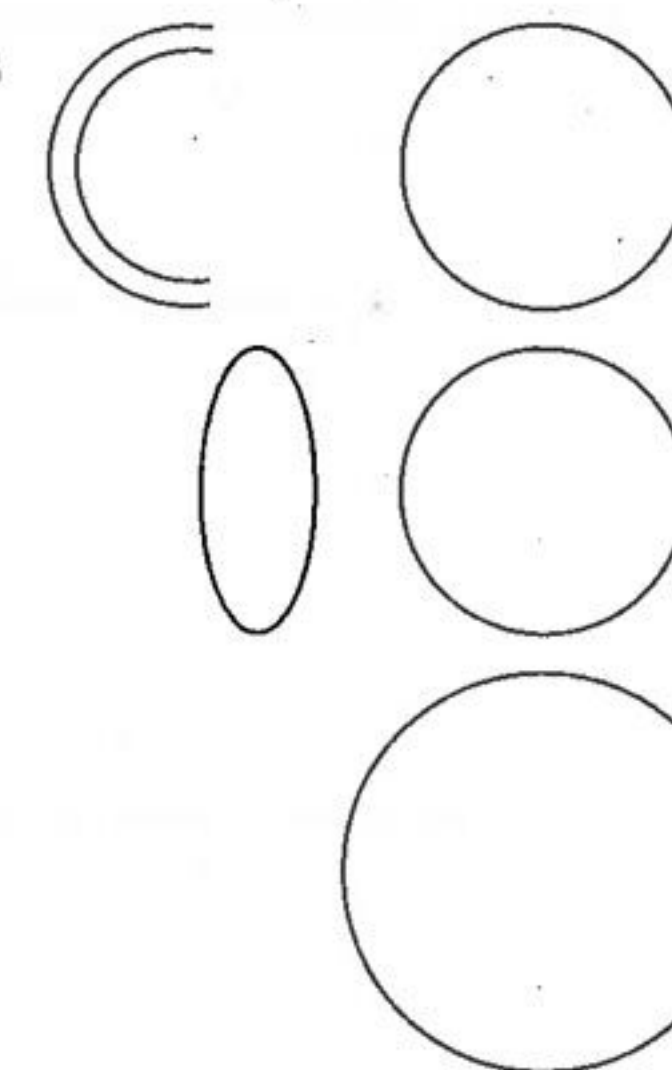
EXAMINATION TECHNIQUE / ONDERSOEKTEGNIK

OBLIGATORY / VERPLIGTEND: Mydriatic / Midriaticum Biomicroscopy / Biomikroskopie
 Ophthalmoscopy / Oftalmoskopie: Indirect / Indirek Direct / Direk
 OPTIONAL / OPSIONEEL: Tonometry / Tonometrie Gonioscopy / Gonioskopie
 Other / Ander:

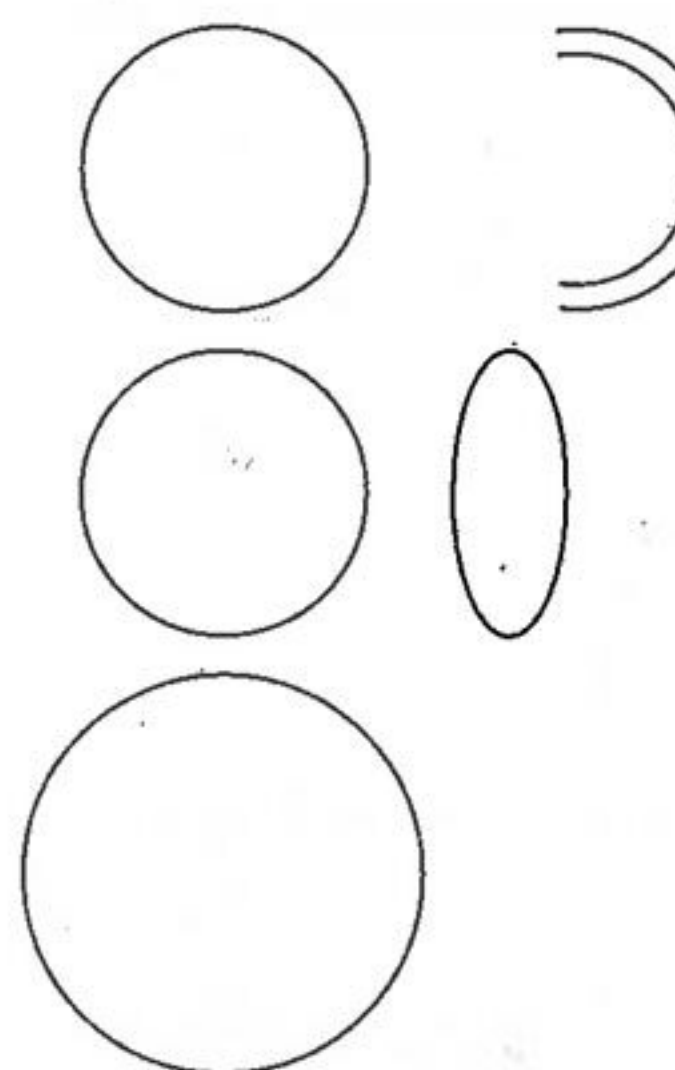
RESULTS / RESULTATE

	Normal / Normaal	Presumed Inherited / Vermoedelik Oorerflik	Nature of Lesion / Aard van die Verandering
Lids / Ooglede	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cornea / Kornea	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Iris	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lens	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vitreous / Glasliggaam	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fundus	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other / Ander	<input type="checkbox"/>	<input type="checkbox"/>

Right / Regs



Cornea / Kornea



Left / Links

Lens

Fundus

Next Examination / Volgende Ondersoek: Annually / Jaarliks Months / Maande

RESULT OF THE EXAMINATION / RESULTAAT VAN DIE ONDERSOEK

Affected / Geaffekteerd Unaffected / Nie Geaffekteerd Undetermined / Onseker
 Date / Datum: 3/7/2017 Veterinarian's Name (Print) / Veearts se Naam (Drukskrif): H. Goudier
 Practice Tel: No: / Praktyk se Tel Nr: 021 970 66 32 Signature / Handtekening:

THIS CERTIFICATE IS ISSUED IN THE LIGHT OF CURRENT KNOWLEDGE, AND IS VALID FOR 12 MONTHS. HIERDIE SERTIFIKAAT IS IN DIE LIG VAN VANDAG SE KENNIS UITGEREIK, EN GELD VIR 12 MAANDE.