



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

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: **SEBREGNO BALTAS VEJAS**
Call name: **APACHE** Weight: **13.5** lbs. Breed: **IBIZAN HOUND** Color: **MALE**
Site Registration #: _____ Date Registration #: _____

Registration Number: **993011200025571**
ID Number (if any): **051626**

Owner Name: **EYGENIYA KLIMOVA**
Co-Owner Name: **ISA-719-2449**
Owner Address: **PO BOX 203**
City: **TEASDALE** State: **UT** Zip/postal code: **84733**
E-Mail (use both lines if needed): **LEANGHAREKENNEL@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 purposes. I understand that posting results will be limited to the public unless the owner or authorized agent or authorized agent appears in the authorization box below with permission of OFA to release non-passing results to the public.

Signature of owner/authorized agent/representative

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

Cardiologist: **Bryan EAS**
Phone #: _____ OFA Exam #: **C003**
E-Mail (use both lines if needed): _____

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



212021

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: **43.6** mm LVIDdn: _____ mm (MM ☒ 2D ☐
LVIDs: **23.9** mm LVIDsn: _____ mm (MM ☒ 2D ☐
LVEDVI (2D): **53.7** mL/m² LVEDVI (2D): **73.2** mL/m²
SF: **45** % (MM ☐ 2D ☐ EF (2D volumetric): **74** %
IVS: **4.1** mm Normal ☐ Abnormal ☐ (MM ☐ 2D ☐
PW: **9.3** mm Normal ☐ Abnormal ☐ (MM ☐ 2D ☐
LA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐
LAd: **32.2** mm SAx ☒ LAx ☐ (MM ☐ 2D ☒ EPSS: _____ mm
Ao Diameter: **27.7** mm LA/Ao: **1.18** Method: **2ch**
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 ☐ **1.33** 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 ☐ **1.19** m/s

Comments _____

Genetic Test Status Test: _____

Negative ☐ Abnormal: Heterozygous ☐ Homozygous ☐

ELECTROCARDIOGRAM ☒ NOT PERFORMED

Date: _____ ☐ normal ☐ abnormal

HR: _____ Method: _____

Rhythm: _____

EXAMINATION RESULTS

NORMAL ☒ OR 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 ☐ OR ALL THAT APPLY

☐ Congenital heart disease cannot be definitively diagnosed nor excluded
☐ Adult-onset inherited heart disease cannot be definitively diagnosed nor excluded

ABNORMAL ☐ OR 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: **Bryan EAS** Date: **5/16/24**

Diplomate ACVIM (American College of Veterinary Internal Medicine-Cardiology)
or Diplomate PCVIM (European College of Veterinary Internal Medicine-Cardiology)

WHITE = Owner/OFA Registration copy
PINK = Diplomate copy
YELLOW = Research copy ☒ Orthopedic Foundation for Animals