

## Certificate of eye examination

European College of Veterinary Ophthalmologists

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ECVO reg.no. Examination AT-100929 ECVO reg.no. examiner

AT-1007

Animal									
Name	Name Casa De Filler Lucky Socks Smudge								
Breed	Australian Shephe	rd			Breedclub	ÖKV			
Registration no.	ÖHZB/ASH 4441								
Microchip no.	040098100538616				Colour	blue merle tri w/co.			
Date of birth	14/08/2020	Sex		male	Tattoo				
Owner/agent Male									
Name	Sabina Achtig DI								
Address	Großreichenbach 17								
Country	AT Post code 3931 Town Schweiggers								
	The undersigned agrees to the rules of the national scheme and confirms that the animal submitted for examination is the one described above. Signature also means that the results are available for official publication or other ECVO approved use.								
Evenination					Identification	Signature owner/s	agent		
Examination Date	03/02/2024	1			Identification Check microchip/tat	too X Correct Inc	orrect/unreada	ble Absent	
Method minimal Mydriatic, indirect ophtalmoscopy and Other methods Direct Ophtalmoscopy									
binocular biomicroscopy >= 10x and comments:  Optional X Examined before dilatation									
	Gonoscopy (without mydric	atic)			Left eye (OS)	-			
Descriptive comments			post,	lat./lemp. med./nas.	15. Other lens opacity:	suture line tip	ICAA : PLA	med./nas. lat./temp mild moderate severe	
						suture line nuclear ring nuclear fiberglass/pulver	ICA 7	narrow (moderate)	
Eye disease no:	Seve	re							
Results for the	e known or presumed heredi UNAFF	ECTED susp	picious/ A	FFECTED	Results valid for	12 months  UNAFFECTED	suspicious/	AFFECTED	
1. Persistent Pu	pillary Membrane (PPM)	x [	etermined [	iris cornea	11. Entropion / Trie		undetermined		
	perpl. Tunica Vasculosa Lentis/ ous (PHTVL/PHPV)	X [		grade 1 grade 2-6	12. Ectropion / Ma	croblepharon			
3. Cataract (con		X [			13. Distichiasis / E	ctopic cilia X			
4. Retinal Dyspl	asia (RD)	(X)		(multi)focal geographical total	14. Corneal dystro	phy X			
5. Hypoplastic-/	Micro-papilla	X [			15. Cataract (later	onset)		cortical post pol. nuclear	
6. Collie Eye An	omaly (CEA)	X [		choroid, hypoplasia coloboma other	16. Lens luxation (	(primary)		other lens o	
7. Other					17. Retinal degene	eration (PRA)			
8 IridaCamani	Angle Abnormality (ICAA)			mild	18. Other				
8. IndoComeal	Angle Abnormality (ICAA)		L	moderate severe					
* "Unaffected" signifies that there is no clinical evidence of the presumed inherited eye disease(s) specified, whereas "affected" signifies that there is such evidence.  ** "Undetermined" The animal displays clinical features that could possibly fit the presumed inherited eye disease(s) mentioned, but the changes are inconclusive.  *** "Suspicious" The animal displays minor, but specific signs of the presumed inherited eye disease(s) mentioned. Further development will confirm the diagnosis.									

FOR FURTHER INFORMATION P.T.O.

Examiner

The undersigned has today examined the above mentioned animal for the hereditary eye disease sceme with the results as shown.

The certificate is valid without signature of the examiner.

The authenticity and validity of the certificate can be checked by scanning the QR code (left side).

Name Günter Maaß

Place