OWNER: Bonnie Buckley  Phone: 978-346-7248

[redacted], MA 01860

Animal Registered Name: BonJohn's Shades of Whisper

Breed/Variety: Std. Poodle  Coat color/type: Black & Silver  Permanent ID#: #098-069-627

**CANINE EYE REGISTRATION FOUNDATION ©**

203
Bulger Veterinary Hospital
Ruth M. Marrion, DVM, DACVO
247 Chickering Road
North Andover, MA 01845
(978) 725-5544

For litters, add number.

**REGISTRATION NO.** TRI 499979 01

*"I hereby declare that the animal submitted for exam is the animal described above. Furthermore, I declare I am the owner or agent of the owner of this animal."*

Signature: B Buckley

PRESS FIRMLY. FILL COMPLETELY.

**SEX**: ☐ Male ☐ Female

**BIRTH DATE**: ☐ Jan ☐ Feb 14 ☐ Mar ☐ Apr ☐ May ☐ Jun ☐ Jul ☐ Aug ☐ Sep ☐ Oct ☐ Nov ☐ Dec — DAY 07 — YEAR 1997

**EXAM DATE**: ☐ Jan ☐ Feb 27 ☐ Mar ☐ Apr ☐ May ☐ Jun ☐ Jul ☐ Aug ☐ Sep ☐ Oct ☐ Nov ☐ Dec — DAY 10 — YEAR 2010

**FOR CERF USE ONLY**

BREED: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

COLOR: 0 1 2 3 4 5 6 7 8 9

522187 DO NOT MARK IN THIS AREA

## GLOBE

RIGHT EYE / LEFT EYE

- ☐ microphthalmos
- ☐ dry eye
- ☐ glaucoma

## EYELIDS

- ☐ entropion
- ☐ ectropion
- ☐ distichiasis
- ☐ ectopic cilia
- ☐ eury/macro blepharon

## THIRD EYELID

- ☐ cartilage anomaly/eversion
- ☐ gland prolapse

## CORNEA

- ☐ dystrophy - - epithelial/stromal
- ☐ dystrophy - - endothelial
- ☐ inherited pannus
- ☐ exposure/pigmentary keratitis

CORNEA (T N A P) — CORNEA (N T A P)

## UVEA

- ☐ iris/ciliary body cyst
- ☐ iris coloboma
- ☐ iris hypoplasia/sphincter dysplasia
- ☐ pigmentary uveitis
- ☐ uveal melanoma
- ☐ persistent pupillary membranes

Endothelial opacity/no strands; Lens pigment foci/no strands; Iris Sheets; Iris to Cornea; Iris to Lens; Iris to Iris

CATARACT (T N A P) — CATARACT (N T A P)

## LENS

| | Diff. | Inter. | Punc. | | Punc. | Inter. | Diff. |
|---|---|---|---|---|---|---|---|
| ☐ | ☐ | ☐ | ☐ | anterior cortex | ☐ | ☐ | ☐ |
| ☐ | ☐ | ☐ | ☐ | posterior cortex | ☐ | ☐ | ☐ |
| ☐ | ☐ | ☐ | ☐ | equatorial cortex | ☐ | ☐ | ☐ |
| ☐ | ☐ | ☐ | ☐ | anterior sutures | ☐ | ☐ | ☐ |
| ☐ | ☐ | ☐ | ☐ | posterior sutures | ☐ | ☐ | ☐ |
| ☐ | ☐ | ☐ | ☐ | nucleus | ☐ | ☐ | ☐ |
| ☐ | ☐ | ☐ | ☐ | capsular | ☐ | ☐ | ☐ |
| ☐ | | | | generalized | | | ☐ |

- ☐ significance of above cataract unknown (describe in comments)
- ☐ subluxation/luxation

## VITREOUS

ant. chamber; syneresis

- ☐ PHPV/PTVL
- ☐ degeneration

syneresis; ant. chamber

## FUNDUS

RIGHT EYE / LEFT EYE

detached; geographic; folds

- ☐ retinal atrophy - - generalized
- ☐ retinal atrophy - - suspicious
- ☐ retinal dysplasia
- ☐ retinopathy
- ☐ choroidal hypoplasia
- ☐ staphyloma/coloboma
- ☐ retinal detachment
- ☐ optic nerve coloboma
- ☐ optic nerve hypoplasia
- ☐ micropapilla
- ☐ OTHER UNLISTED CONDITIONS suspected as inherited. Describe in comments.
- ☐ OTHER conditions suspected as not inherited
- ☐ NORMAL

folds; geographic; detached

SCANTRON EW-F20739-3:6554321 AS99



- ☐ DUPLICATE FORM
  This dog's microchip has been scanned and matches the number provided on the form.

*I certify that I have performed this ophthalmic examination using pharmacologic mydriasis, ophthalmoscopy, and biomicroscopy.*

Signature: Mr Marie  Date: 5/27/10

*Diplomate, American College of Veterinary Ophthalmologists*

COMMENTS

ACVO # 203

Owner Copy

*Please note to ensure proper registration this original owner's copy must be mailed directly to CERF*