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
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www.ofa.org, A not-for-profit organization

ACVIM American College of Veterinary Internal Medicine

Registered name: Bancroft Septella of Hallowhawks
Call name: Septella | Weight: ☐ kg ☑ lbs ☐ Estimate 10.5
Breed: Maine Coon | Gender: F
Sire Registration #: SBT 060522 099 | Dam Registration #: SBT 03/624 059
Registration Number: ☐ AKC ☑ Other TICA SBT 03202505 050
ID Number (if any): ☐ Tattoo ☐ Microchip
Date of Birth: (MMDDYY) 032025 | Date of Exam: (MMDDYY) 092626

Owner Name: James Simmons
Co-Owner Name: Katherine Simmons | Phone: (907)750-9225
Owner Address: 3665 River Rd
City: Perry | State: OH | Zip/postal code: 44081
E-Mail (use both lines if needed): halonacoons@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 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 permits the OFA to release non-passing results to the public.

Signature of owner or authorized agent/representative

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

Cardiologist Name:
Sarah E. Achen, DVM, DACVIM (Cardiology)
OFA Examiner #CA01
BluePearl Veterinary Partners
29080 Inkster Rd.
Southfield, MI 48034
P:248-354-6660 F:248-354-0303
Email: Cardiology.MI@bluepearlvet.com

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

203448

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: 18.9 mm **LVIDdn:** ____mm (MM ☐ 2D ☒)
LVIDs: 8.9 mm **LVIDsn:** ____mm (MM ☐ 2D ☒)
LV EDVI (2D): 52.0 *mL/m²* **LV ESVI (2D):** ____ *mL/m²*
SF: ____% (MM ☐ 2D ☒) **EF** *(2D volumetric)*: ____%
IVS: *IVSd* 4.2 *mm* Normal ☒ Abnormal ☐ (MM ☐ 2D ☒)
PW: *PWd* 3.4 *mm* Normal ☒ Abnormal ☐ (MM ☐ 2D ☒)
LA: Normal ☒ Enlarged: Mild ☐ Moderate ☐ Severe ☐
LAd: 12.1 mm: SAx ☒ LAx ☐ (MM ☒ 2D ☐) **EPSS:** ____ *mm*
Ao Diameter: 10.4 mm **LA/Ao:** 1.16 Method: MM

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* ☐) 1.23 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 ☐) 0.87 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 SLA 9/26/26 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

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