

**BRITISH VETERINARY ASSOCIATION/KENNEL CLUB HIP DYSPLASIA SCHEME**

To: British Veterinary Association  
7 Mansfield Street, London W1G 9NQ  
Telephone: 020 7636 6541

THE ORIGINAL OF THIS  
CERTIFICATE IS GREEN

**05 - 37874**

**Owner's Declaration**

(PLEASE COMPLETE USING BLOCK CAPITALS AND BLACK INK)

KC Registered Number **AE00155 203**

KC Registered Name **WILDBACH BLACK ADDER**  
Breed **GERMAN SH. POINTER** Sex **D** Date of birth **05.12.2003**  
Name of owner **ANGELA J BOYD** Address **SYCKMORES,  
POLLADRAS, BREAGE, HELSTON, CORNWALL TR15 9MT**

Sire: <b>BIRKENWALD LAKOSS VOM HERBSTMOND</b>	PGS: <b>WALDBURG JEDD</b>
	PGD: <b>BIRKENWALD ANYA</b>
Dam: <b>WILDBACH CANDIDE</b>	MGS: <b>KARA KURZHAAR DEER HUNTER MW</b>
	MGD: <b>WILDBACH OKLAHOMA</b>

I hereby declare that (NB: DELETION OF ANY OF THESE ITEMS INVALIDATES THIS CERTIFICATE)  
(a) The particulars above are correct and relate to the dog submitted today for radiographic examination  
(b) This dog is a minimum of one year old and has not previously been scored under the scheme  
(c) I give permission for a copy of the certificate to be sent to the geneticist retained by the breed society or other representative body  
(d) I give permission for the results of the examination to be used at a future date for the purpose of statistical research  
(e) I give permission for the results to be published and included on the relevant KC documents

Owner's signature **Angela J Boyd** Date **5 Jan 2005**

**Submitting Veterinary Surgeon's Certificate** (PLEASE COMPLETE USING BLOCK CAPITALS AND BLACK INK)

Microchip/tattoo number (if known): \_\_\_\_\_ I certify that the radiograph relating to the dog identified above was taken on the following date **05/01/2005** and in conformity with the provisions of the HD Scheme Procedure Notes

Animal Veterinary Services  
18 Fore St  
Copperhouse, Hayle  
TR27 4DY

Veterinary surgeon submitting radiograph (BLOCK CAPITALS) **H BUTCHER**  
Address **Animal Vet Services, 16-18 Fore St  
Hayle, Cornwall** Post code **TR27 4DY**  
Date **14/01/05** Signed **[Signature]** F/MRCVS

Please submit the correct fee for the radiograph to be processed (cheques payable to BVA.) For current fees contact BVA

**CERTIFICATE OF SCORING**

HIP JOINT	Score Range	Right	Left
Norberg angle	0-6	1	0
Subluxation	0-6	2	1
Cranial acetabular edge	0-6	2	1
Dorsal acetabular edge	0-6	7	
Cranial effective acetabular rim	0-6		
Acetabular fossa	0-6		
Caudal acetabular edge	0-5		
Femoral head/neck exostosis	0-6		
Femoral head recontouring	0-6		
TOTALS (max possible 53 per column)		5	2

**NB** The scores represent the opinion of the BVA appointed scrutineers for the radiograph submitted. The lower the score, the less evidence of hip dysplasia present. Please consult the current procedure notes and breed mean score sheet for relevant details (available from BVA)

Total score (max possible 106) **7**

WE HEREBY CERTIFY that the score of the radiograph submitted for the dog identified above was produced using the scoring criteria of the BVA/Kennel Club Hip Dysplasia Scheme Date **26 JAN 2005**

Signed **[Signature]** F/MRCVS Signed **[Signature]** F/MRCVS **1/97**