

From: Melissa Farmer [farmerdoodles@reagan.com](mailto:farmerdoodles@reagan.com)  
 Subject: Patella let me know if this not clear  
 Date: Sep 22, 2017, 3:18:50 PM  
 To: Keepsake [keepsakedoodles@gmail.com](mailto:keepsakedoodles@gmail.com)

Orthopedic Foundation for Animals																																																					
APPL. <input type="checkbox"/> RAD. <input type="checkbox"/> CK. <input type="checkbox"/>	2300 E. Noland Blvd, Columbia, MO 65201-3806 Phone: (573) 442-0418, Fax: (573) 3875-5073 www.ofa.org																																																				
A Non-Profit Organization																																																					
																																																					
<b>Application for Patellar Luxation Database</b>																																																					
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<p>I hereby certify that the information submitted is of the animal described on this application. I understand that only normal results will be released to the public unless the initials of a registered owner appear in the authorization box below which permits the OFA to release abnormal results to the public.</p> <p><b>Signature of owner or authorized representative:</b></p>																																																					
<p><b>Authorization to Release Abnormal Results</b></p> <p>I hereby authorize the OFA to release the results of its evaluation of the animal described on this application to the public if the results are abnormal (initials of registered owner):</p>																																																					
<p><b>Patellar Examination Results</b></p>																																																					
<p>1. Normal <input checked="" type="checkbox"/> right <input checked="" type="checkbox"/> left</p> <p>2. Patellar Luxation</p> <p><input type="checkbox"/> bilateral</p> <p><input type="checkbox"/> unilateral: <input type="checkbox"/> right <input type="checkbox"/> left <input type="checkbox"/> lateral</p> <p><input type="checkbox"/> luxated: <input type="checkbox"/> medial <input type="checkbox"/> permanent</p> <p><i>luxation is:</i> <input type="checkbox"/> intermittent <input type="checkbox"/> permanent</p> <p><i>age of onset:</i> <input type="checkbox"/> &lt; 2 months <input type="checkbox"/> 2-6 months <input type="checkbox"/> Grade 4—The tibia is medially twisted and the tibial crest may show further deviation medially with the result that it lies 50 degrees to 90 degrees from the cranial/caudal plane.</p> <p><input type="checkbox"/> &lt; 2 months <input type="checkbox"/> 2-6 months <input type="checkbox"/> &gt; 12 months</p> <p><input type="checkbox"/> I certify that the examination was performed according to the OFA procedure.</p> <p><input checked="" type="checkbox"/> I DID verify tattoo/microchip on this dog <input checked="" type="checkbox"/> I DID NOT verify tattoo/microchip on this dog</p>																																																					
<p><b>Veterinarian Signature:</b> <i>K. Farmer</i> <b>Specialty:</b> <input checked="" type="checkbox"/> Practitioner, <input type="checkbox"/> Specialist <b>Date:</b> <b>9-22-17</b></p>																																																					
<p><b>Fees</b></p> <p>Animals over 12 months.....\$15.00 each</p> <p>A litter of 2 or more submitted together.....\$30.00 total</p> <p>Exams on animals under 12 months of age are considered preliminary evaluations and are not eligible for OFA numbers</p> <p>Payments can be made by check, money order (U.S. funds drawn on a U.S. bank), cash, Visa, or Mastercard, payable to the Orthopedic Foundation for Animals.</p>																																																					
<p><b>Name on Card</b> _____ <b>Exp Date</b> _____ <b>CVV (security code)</b> _____</p>																																																					
<p>Visa/Master Card Number</p> <p>4/11/12</p>																																																					
<p><b>Affected dogs and resubmits are no charge</b></p>																																																					

Melissa 