

Canine Congenital Exam



ACVIM Registry of Companion Animal Health

To complete the certification process, send this form and payment to:
 4425 S. Mopac Expy, Ste. 600 Austin, TX 78735 512-535-5611
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Required fields are denoted with * and are in bold.

Demographic Information

Animal Information:

*Registered Name:

*Registration #:

AKC CKC

Other ID #:

Microchip Tattoo

Gender:

Birthdate:

Breed:

Owner Information:

*Last Name:

First Name:

*Email: (print clearly)

Address:

Phone #:

City:

State:

Zip:

Co-Owner Name:

Fees:

\$15-Preliminary Congenital (<12 months)

\$15-ARCH Cardiac Certification

No charge for Affected animals

Cardiologist Information:

Name:

Clinic Name:

Phone #:

Required Congenital Exam Results SAS Generic

Auscultation:

Result: Normal Murmur

Echocardiogram:

Result: Normal Abnormal No Echo performed

Congenital Findings:

Normal Exam: No evidence for congenital heart disease. / (SAS Exam) No evidence for congenital subaortic stenosis.

Uncertain Exam: (Generic Exam) Congenital heart disease cannot be definitively diagnosed or excluded.
 (SAS Exam) Congenital subaortic stenosis cannot be definitively diagnosed or excluded.

Affected Exam: (Generic Exam) Evidence of congenital heart disease is present.
 (SAS Exam) Evidence of congenital subaortic stenosis is present.

Severity: Mild Moderate Severe Diagnosis(es):

Exam Quality: Poor Degraded Good Excellent

Optional - Detailed Exam Information

Auscultation:

Grade (1-6):

Pant

Timing:

Systolic Diastolic Continuous To and Fro

Primary PMI:

Lt base Lt apex Lt midheart
 Rt midheart Rt sternal

Extra Sounds:

Click Split S1 Split S2 S3/S4

Other:

Mucous Membranes: Pink Pale pink Injected Cyanotic

PMI: Left base Left apex Left midheart Right midheart

Jugular vein inspection: Not done Normal Pulses/distension Other

Echocardiogram:

Method Obtained: Manual restraint Sedation required

(SAS Exam only) LVOT velocity (m/s):

(SAS Exam only) Location LVOT measure: Left apical Subcostal

LVd:(mm) LAD:(mm)

LVs:(mm) AoD:(mm)

IVSd:(mm) LVPWd:(mm)

Precordial Palpatation: Normal R > L Thrill

Right sternal border

Arterial pulse: Not done Normal Hypokinetic Hyperkinetic Other

*Certification

Cardiologist:

I certify that I examined this animal and my findings are correctly represented here. I further understand these results will be entered into the ARCH registry where the animal's owner may obtain a certified copy of the findings.

Signed by:

Date:

DO NOT RETURN COMPLETED FORM TO OWNER