

# Orthopedic Foundation for Animals Preliminary (Consultation) Report



A Not-For-Profit  
Organization

DOG'S PARADISE FAYE  
registered name

DP2017102001  
registration number

LABRADOODLE  
breed

F  
sex

528210004660715  
tattoo/microchip/DNA profile

10/20/2017  
date of birth

2027025  
application number

14  
age at evaluation in months

1/30/2019  
date of report

film/case no(s)

Owner

DOG'S PARADISE LABRADOODLES  
BIEZENMORTESESTRAAT 2  
BIEZENMORTEL, HOLLAND 5074 PD  
THE NETHERLANDS

Veterinarian

DIERGENEESKUNDIG CENTRUM OISTERWIJK  
MOLENBAAN 7A  
5063 PA OISTERWIJK,  
NETHERLANDS

### RADIOGRAPHIC EVALUATION OF PELVIC PHENOTYPE WITH RESPECT TO HIP DYSPLASIA

\* The study must be repeated when the animal is 24 months of age or older to qualify for an OFA number.

<p><input checked="" type="checkbox"/> <b>EXCELLENT HIP JOINT CONFORMATION*</b> superior hip joint conformation as compared with other individuals of the same breed and age</p> <p><input type="checkbox"/> <b>GOOD HIP JOINT CONFORMATION*</b> well formed hip joint conformation as compared with other individuals of the same breed and age</p> <p><input type="checkbox"/> <b>FAIR HIP JOINT CONFORMATION*</b> minor irregularities of the hip joint conformation as compared with other individuals of the same breed and age</p>	<p><input type="checkbox"/> <b>BORDERLINE HIP JOINT CONFORMATION</b> marginal hip joint conformation of indeterminate status with respect to hip dysplasia at this time – <b>Repeat study in six months</b></p> <p><input type="checkbox"/> <b>MILD HIP DYSPLASIA</b> radiographic evidence of minor dysplastic changes of the hip joints</p> <p><input type="checkbox"/> <b>MODERATE HIP DYSPLASIA</b> well defined radiographic evidence of dysplastic changes of the hip joints</p> <p><input type="checkbox"/> <b>SEVERE HIP DYSPLASIA</b> radiographic evidence of marked dysplastic changes of the hip joints</p>
--	---

### RADIOGRAPHIC FINDINGS

<p><input type="checkbox"/> subluxation</p> <p><input type="checkbox"/> remodeling of femoral head/neck</p> <p><input type="checkbox"/> osteoarthritis/degenerative joint disease</p> <p><input type="checkbox"/> shallow acetabula</p> <p><input type="checkbox"/> acetabular rim/edge change</p>	<p><input type="checkbox"/> unilateral pathology <input type="checkbox"/> left <input type="checkbox"/> right</p> <p><input type="checkbox"/> transitional vertebra</p> <p><input type="checkbox"/> spondylosis</p> <p><input type="checkbox"/> panosteitis</p> <p><input type="checkbox"/> other</p>
--	---

Consultation by:

*G.G. Keller DVM*  
G.G. KELLER, DVM, MS, DACVR  
CHIEF OF VETERINARY SERVICES

2300 E Nifong Blvd  
Columbia MO 65201

Tele: (573) 442-0418  
Fax: (573) 875-5073

Email: ofa@ofa.org  
Website: <https://www.ofa.org>