Owner: CHARLES M ROGERS 11-18-00

Address (Street & No., City, Zip Code): 11122 EAGLE VIEW DR SANDY UT 84060

Animal Registered Name: CH. ASPENGLO CISCO

Breed/Variety: GOLDEN RETRIEVER

Coat color/type:

Tattoo / Chip #: 4321 F 3828

CANINE EYE REGISTRATION FOUNDATION

The Eye Clinic for Animals
1892 E. Ft. Union Blvd.
Salt Lake City, UT 84121
(801) 942-EYES (3937)

181 / 186

ATTENTION: PLEASE COMPLETE REVERSE SIDE OF FORM FOR CERF CERTIFICATION.

REGISTRATION NO.: 5U75246500

"I hereby declare that the animal submitted for exam is the animal described above. Furthermore, I declare I am the owner or agent of the owner of this animal."

Signature

RIGHT MARK

SEX: Male / Female

BIRTH DATE: Jan / Feb / Mar / Apr / May / Jun / Jul / Aug / Sep / Oct / Nov / Dec — DAY 18 YEAR 00

EXAM DATE: Jan / Feb / Mar / Apr / May / Jun / Jul / Aug / Sep / Oct / Nov / Dec — DAY 21 YEAR 04

FOR CERF USE ONLY: BREED / COLOR

NO. 2 PENCIL, BLUE, OR BLACK INK OK

RIGHT EYE		LEFT EYE
GLOBE		
microphthalmos		
EYELIDS (upper / lower)		(lower / upper)
entropion		
ectropion		
distichiasis		
ectopic cilia		
macroblepharon		
THIRD EYELID		
cartilage anomaly/eversion		
gland prolapse		
CORNEA		
dystrophy - - epithelial/stromal		
dystrophy - - endothelial		
chronic superficial keratitis/pannus		
exposure keratopathy syndrome		
UVEA		
iris cysts		
iris coloboma		
persistent pupillary membranes		
LENS (Diff. / Inter. / Punc.)		(Punc. / Inter. / Diff.)
anterior cortex		
posterior cortex		
equatorial cortex		
anterior sutures		
posterior sutures		
nucleus		
capsular		
generalized		
significance of above punctate or capsular cataract unknown		
subluxation/luxation		
VITREOUS		
degeneration		
persistent hyaloid artery		
PHPV/PTVL		

CORNEA: T N / A P — Iris Sheets, Iris to Cornea, Iris to Lens, Iris to Iris

CATARACT: T N / A P

RIGHT EYE		LEFT EYE
FUNDUS (detached / geographic / folds)		(folds / geographic / detached)
retinal atrophy - - generalized		
retinal atrophy - - suspicious		
retinal dysplasia		
choroidal hypoplasia		
staphyloma/coloboma		
retinal detachment		
retinal hemorrhage		
optic nerve coloboma		
optic nerve hypoplasia		
micropapilla		
OTHER reserved for conditions which are suspected as inherited. Describe in comments.		
OTHER reserved for conditions which are suspected as non-inherited. Describe in comments.		
NORMAL		

I certify that I have performed this ophthalmic examination using pharmacologic mydriasis, ophthalmoscopy, and biomicroscopy.

Signature: [signature] Date: 3-31-04

Diplomate, American College of Veterinary Ophthalmologists

COMMENTS

ACVO #: 181

Owner Copy*