



Orthopedic Foundation for Animals
 2300 E. Nifong Blvd, Columbia, MO 65201-3806
 Phone: (573) 442-0418; Email: ofa@ofa.org
 www.ofa.org. A not-for-profit organization

Call name: TURNER Coat color: BLACK Sex: M

Registered name: CH. SAFARI'S TURNCOAT

Breed: STANDARDS POODLE

ID Number (if any): Tattoo Microchip 9560001422074

Registration Number: PK26642908 BAIC Other

Date of Birth (mm/dd/yy): 011023 Date of Exam (mm/dd/yy): 022424

Owner Name: CYNTHIA HUFF Phone: (309) 376-2102

Co-Owner Name: JOEL HAEFNER

Owner Address: 2094 E 2250 NORTH RD.

City: CARLOCK State: IL Zip/postal code: 61724

E-Mail (use both lines if needed): cahuff@ilstu.edu

I hereby certify that the animal examined is the animal described on this application, and understand that the results of this exam will be submitted by the examining ophthalmologist to the database for statistical gathering purposes. I understand that only passing results will be released to the public unless the initials of a registered owner or authorized agent appear in the authorization box below which permits the OFA to release non-passing results to the public.

Signature of owner or authorized agent/representative
Joel Haefner

I hereby authorize the OFA to release the results of the evaluation of the animal described on this application to the public if the results are non-passing (initials)

I DID verify microchip/tattoo on this dog
 I DID NOT verify microchip/tattoo on this dog
 NO MICROCHIP/TATTOO PRESENT

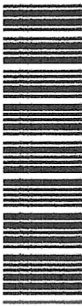
I certify that I have performed this ophthalmic examination using pharmacological mydriasis, ophthalmoscopy, and biomicroscopy.

Signature: [Signature] Date: 2/24/24

ACVO # W 24427

Diplomate, American College of Veterinary Ophthalmologists

FEE AND CREDIT CARD INFORMATION ON THE BACK OF THE WHITE (OWNER) COPY



202501

Companion Animal Eye Registry (CAER)

Ophthalmologist Name: ACVIM, DVM, MS, DACVO
 Ophthalmologist Address: EC555
 Ophthalmologist Phone: WWW.ASKINGEYECLINIC.COM
 Ophthalmologist Email: WWW.ASKINGEYECLINIC.COM
 Zip/postal code:

RIGHT EYE **GLOBE** **LEFT EYE**

microphthalmos
 keratoconjunctivitis sicca
 glaucoma

EYELIDS

entropion
 ectropion
 distichiasis
 ectopic cilia
 imperforate lacrimal punctum

NICTITANS

cartilage anomaly/eversion
 gland prolapse
 plasmoma/atypical pannus

CORNEA

dystrophy—epithelial/stromal
 dystrophy—endothelial
 pannus
 pigmentary keratitis/keratopathy

UVEA

uveal cyst
 iris coloboma
 iris hypoplasia
 pigmentary uveitis

persistent pupillary membranes

CORNEA

T N

A P

endothelial opacity/no strands
 lens pigment foci/no strands
 iris sheets
 iris to cornea
 iris to lens
 iris to iris
 free float/rupt.
 single
 multiple

LENS

Incp. Pnc. Incp. Pnc.

anterior cortex
 posterior cortex
 equatorial cortex
 anterior sutures
 posterior sutures
 nucleus
 capsular
 generalized/complete
 resorbing/hypermature

CATARACT

T N

A P

OTHER CONDITIONS

Unlisted conditions suspected as inherited. Describe in comments

Unlisted conditions suspected as **not inherited**

Comments

NORMAL

RIGHT EYE **FUNDUS** **LEFT EYE**

detached geographic folds

retinal detachment
 retinal atrophy—generalized
 CMR/CMR-like retinopathy
 other presumed inherited retinopathy
 retinal dysplasia

choroidal hypoplasia
 coloboma
 optic nerve coloboma
 optic nerve hypoplasia
 micropapilla

OTHER CONDITIONS

Unlisted conditions suspected as inherited. Describe in comments

Unlisted conditions suspected as **not inherited**

Comments

NORMAL

Comments

VITREOUS

ant. chamber syneresis

posterior Y-suture tip opacities
 subluxation/luxation

PHPV/PHTVL
 persistent hyaloid artery
 degeneration