

# Lotus's OFA Certification Good Hips / Normal Elbows



**Orthopedic Foundation for Animals  
Preliminary (Consultation) Report**

VF LOTUS'S MIDNIGHT KAHEKILI STORM  
registered name

GERMAN SHEPHERD DOG  
breed

film/test/ab #  
981020023105042  
tattoo/microchip/DNA profile

2148434  
application number

06/02/2020  
date of report

DN55621613  
registration no.

F  
sex

09/17/2018  
date of birth

20  
age at evaluation in months

A Not-For-Profit  
Organization

owner SANDRA SWAIN  
172 RICH GULCH ROAD  
OROVILLE CA 95965

veterinarian ORANGEVALE VETERINARY HOSPITAL  
6248 MAIN AVE  
ORANGEVALE CA 95662

**RADIOGRAPHIC EVALUATION OF PHENOTYPE WITH RESPECT TO ELBOW DYSPLASIA**  
\* The study must be repeated when the animal is 24 months of age or older to qualify for an OFA number.

**ELBOW JOINTS – FLEXED LATERAL VIEW**  
 negative for elbow dysplasia \*      L  R

**ELBOW DYSPLASIA**

Grade I	L _____ R _____
Grade II	L _____ R _____
Grade III	L _____ R _____

**RADIOGRAPHIC FINDINGS**

degenerative joint disease (DJD)	L _____ R _____
ununited anconeal process (UAP)	L _____ R _____
fragmented coracoid process (FCP)	L _____ R _____
osteochondritis	L _____ R _____

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

NOTATION

2300 E Nilong Blvd  
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**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><b>EXCELLENT HIP JOINT CONFORMATION*</b> superior hip joint conformation as compared with other individuals of the same breed and age</p> <p><input checked="" 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 – Repeat study in six months</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>
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**RADIOGRAPHIC FINDINGS**

<input type="checkbox"/> subluxation <input type="checkbox"/> remodeling of femoral head/neck <input type="checkbox"/> osteoarthritis/degenerative joint disease <input type="checkbox"/> shallow acetabula <input type="checkbox"/> acetabular rim/ridge change	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> unilateral pathology  <input type="checkbox"/> transitional vertebra  <input type="checkbox"/> spondylolysis  <input type="checkbox"/> panostitis  <input type="checkbox"/> other                             </td> <td style="width: 50%; vertical-align: top;"> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">left</td> <td style="width: 50%; text-align: center;">right</td> </tr> </table> </td> </tr> </table>	<input type="checkbox"/> unilateral pathology <input type="checkbox"/> transitional vertebra <input type="checkbox"/> spondylolysis <input type="checkbox"/> panostitis <input type="checkbox"/> other	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">left</td> <td style="width: 50%; text-align: center;">right</td> </tr> </table>	left	right
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