# Application for Advanced Cardiac Database

Performed in association with the Orthopedic Foundation for Animals (OFA) and the American College of Veterinary Internal Medicine—Cardiology (ACVIM)

<table>
<thead>
<tr>
<th>Genetic Test Status:</th>
<th>Test ____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negative</td>
<td>Abnormal: Heterozygous</td>
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</tbody>
</table>

## EXAMINATION FINDINGS

### AUSCULTATION

- Normal | Abnormal | Arrhythmia

### EXAMINATION RESULTS

#### ELECTROCARDIOGRAM (ECG)

- normal | abnormal | not performed

#### HOLTER ECG

- Date performed:__________
- pending | not performed
- normal: equivocal | abnormal: (see Holter report for details)

#### ECHOCARDIOGRAM ≠ NOT PERFORMED

<table>
<thead>
<tr>
<th>RA: Normal</th>
<th>Enlarged mm</th>
<th>RV: Normal</th>
<th>enlarged mm</th>
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</thead>
</table>

### ECHOCARDIOGRAM

- RA: Normal
- LA: Normal
- LV: Normal
- MV: Normal
- MR: None
- TR: None
- MR: None
- LA: Normal
- LV: Normal
- MV: Normal
- MR: None
- TR: None
- MR: None

### Cardiologist Name:

- Phone: OFA Examiner #: 

### Cardiac Test Results:

- Date: Method: 

### CONGENITAL/ADULT ONSET INHERITED HEART DISEASE

- ARVC | ASD | DCM | HCM | MVD | MMVD | PDA | PS | SADAS | TVD | VSD | Other | 

### Severity:

- Mild | Moderate | Severe

### Comments (additional findings which would not result in a final abnormal diagnosis):

- Other ________________

### Signature of owner or authorized agent:

I hereby certify that the animal examined is the animal described on this application, and understand that only passing results will be released to the public unless the initial 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

I hereby authorize the OFA to release equivocal or abnormal results to the public. (initials) ________________

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www.offa.org, A not-for-profit organization

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**American College of Veterinary Internal Medicine**

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**Diplomate ACVIM | American College of Veterinary Internal Medicine – Cardiology**

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12/22/15

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**WHITE = Owner/OFA Registration copy; YELLOW = Research copy; PINK = Diplomate copy**

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OFA Advanced Cardiac Clearance Database Fees

- Animals over 12 months of age: $15.00
- Litter of 3 or more submitted together: $30.00
- Kennel Rate—Minimum of 5 individuals submitted as a group, owned/ co-owned by same person: $7.50 ea.
- Submission of non-passing results in the open database: NO CHARGE

Credit Card Payment Information

Payments can be made by check, money order (U.S. funds drawn on a U.S. bank), cash, Visa, or Mastercard, payable to the Orthopedic Foundation for Animals. To pay by credit card, fill out the following information.

Cardholder name: ____________________________________________________________

Visa/Master Card Number (1 digit per cell, no dashes)

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Exp. (MM|YY)  CVV

Abbreviations of diseases listed on front page

ARVC: Arrhythmogenic right ventricular cardiomyopathy
ASD: Atrial septal defect
DCM: Dilated cardiomyopathy
HCM: Hypertrophic cardiomyopathy
MMVD: Myxomatous mitral valve disease
PDA: Patent ductus arteriosus
PS: Pulmonic stenosis
SAS/AS: Subaortic stenosis/aortic stenosis
TVD: Tricuspid valve dysplasia
VSD: Ventricular septal defect

Purpose of cardiac health screening in dogs

- To identify dogs free from any cardiac abnormality
- To ascertain the prevalence of heart murmurs, abnormal rhythms or specific heart defects in specific breeds
- To confirm the cause of heart murmurs or abnormal rhythms by further investigation of affected animals
- To collate data for investigation of a possible genetic basis to a specific heart problem in a given breed
- To advise the owner, breeder and dog’s veterinarian when an abnormality has been identified and recommendations about any further investigation, if indicated

Methods of heart testing

1. **Auscultation: examination with a stethoscope**

   Auscultation allows detection of heart murmurs, the specific timing and localization as well as grading of intensity (grade 0 - 6). The heart rhythm is also assessed during auscultation. Heart murmurs occur with many congenital heart defects and adult onset inherited cardiac diseases such as myxomatous mitral valve disease (MMVD). Some common forms of congenital heart disease include subaortic stenosis (SAS), patent ductus arteriosus (PDA), pulmonic stenosis (PS) and tricuspid valve dysplasia (TVD). Abnormal heart rhythms may occur in animals without murmurs in dilated cardiomyopathy (DCM) or arrhythmogenic right ventricular cardiomyopathy (ARVC). It may be difficult for the veterinarian to detect a soft murmur in a noisy room or in a dog that is squirmy. Some murmurs may change intensity at different heart rates, after exercise or excitement.

2. **Electrocardiogram (ECG)**

   This is always indicated if an abnormal heart rhythm is detected. It is most often used to screen certain breeds of dogs for DCM or ARVC.

3. **Echocardiogram (with Doppler)**

   Echocardiography allows visualization the heart chambers and valves in real-time. M-mode is used for measurements to be taken and compared with normal values for breed or size of dog. Doppler is required to confirm the diagnosis of a specific type of congenital defect and to identify mildly versus severely affected animals. In some cases, it is difficult to be certain whether a dog has mild disease or an “innocent” murmur.

4. **Holter ECG (separate report required)**

   This test is indicated in breeds predisposed to DCM or arrhythmogenic right ventricular cardiomyopathy. Affected dogs may display ventricular arrhythmias early in the disease process, when the echocardiogram does not reveal any abnormalities yet. A Holter (24h ECG) allows detection of infrequent, but significant arrhythmias.

   **For final clearance a 24 hour Holter is required in Boxers and Doberman Pinschers.**

Adult onset of inherited heart disease can appear at any age of an adult dog or cat. Testing for DCM, ARVC, MMVD and HCM is thus only valid for 1 year, after which time retesting is required to screen for onset of new abnormalities.