# Canine Genetic Testing Report

**Submitted By:** AG109508

**Subject Dog**

- **Dog Name:** Isla
- **Breed:** Saarloos Wolfdog
- **Phenotype:**

**Registration:**

- **Sex:**
- **Birth:**

**Date Received:** 2/19/2013

## Sire

- **Sire Name:**
- **Breed:**
- **Registration:**
- **Phenotype:**

## Dam

- **Dam Name:**
- **Breed:**
- **Registration:**
- **Phenotype:**

## Coat Color/Type Testing

<table>
<thead>
<tr>
<th>Locus Type</th>
<th>Test Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Locus-Ay</td>
<td>Not Tested</td>
</tr>
<tr>
<td>A Locus-At</td>
<td>Not Tested</td>
</tr>
<tr>
<td>A Locus-a</td>
<td>Not Tested</td>
</tr>
<tr>
<td>B Locus</td>
<td>Not Tested</td>
</tr>
<tr>
<td>D Locus</td>
<td>Not Tested</td>
</tr>
<tr>
<td>E Locus-EM</td>
<td>Not Tested</td>
</tr>
<tr>
<td>E Locus-e</td>
<td>Not Tested</td>
</tr>
<tr>
<td>K Locus-KB</td>
<td>Not Tested</td>
</tr>
<tr>
<td>Spotting</td>
<td>Not Tested</td>
</tr>
<tr>
<td>Hair Length</td>
<td>Not Tested</td>
</tr>
<tr>
<td>Hair Curl</td>
<td>Not Tested</td>
</tr>
<tr>
<td>Furnishings</td>
<td>Not Tested</td>
</tr>
<tr>
<td>Bobtail</td>
<td>Not Tested</td>
</tr>
</tbody>
</table>

## Genetic Disorders

- **X DM n/DM**
  - Carrier: Dog carries one copy of the mutation associated with Degenerative Myelopathy, and could pass on the mutation to any offspring
- **PLL**
  - Not Tested

## Genetic Marker Results

| Marker | X | AHT121 | AHT137 | AHT171 | AHT200 | AHT211 | AHT253 | C22-279 | FH2054 | FH2848 | INRA21 | INU005 | INU030 | INU055 | REN54P11 | REN162C04 | REN169D01 | REN169O18 | REN247M23 |
|--------|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----------|----------|----------|----------|
|        |   |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |          |          |          |          |
|        |   |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |          |          |          |          |

**DM = Degenerative Myelopathy**

**PLL = Primary Lens Luxation**

## Additional Comments

None

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Thank you for choosing Animal Genetics Inc.

Toll Free: 866.922.6436  Phone: 850.386.2973  Fax: 850.386.1146  Web: www.caninetesting.com
British Veterinary Association/Kennel Club/International Sheep Dog Society

CERTIFICATE OF EYE EXAMINATION

KC/ISDS registered name: AINAfelt'sHoff

Panellist's ref no: ZVG20898

Registered no: CMKUSANS712

Czech AC

Breed: Scarlet Wolfhound

Colour: Grey

Sex: M

Date of birth: 19.08.78

Owner's name: Mrs Jones

Owner's veterinary surgeon: CLEATCHMORE

Owner's address:

Previous examination: No [ ] Yes [ ] Date of last exam: 

Microchip/tattoo no: 53700001031111753

I hereby declare that the dog submitted for examination under the BVA/KC/ISDS Eye Scheme is the one described above. I agree that the registration document should be stamped with the date of this examination and that the information obtained may be made available for research purposes and may be published (deletion of these statements invalidates the certificate). Any appeal against the results specified below must be made to the BVA (for details see leaflet EPWP1).

Date: 08-12-15

Signed: Owner/Agent

EXAMINATION OF THE EYE AND ADNEXA

Mydriatic: [ ] Ophthalmoscopy: Direct [ ] Indirect [ ] Biomicroscopy: [ ] Gonioscopy: [ ] Other

Parts examined:

 Clinically Unaffected

 Clinically Affected

Adnexa

Cornea

Drainage Angle

Iris

Lens

Vitreous

Fundus

Descriptive comments:

CLINICALLY AFFECTED for conditions NOT currently known or proven to be inherited in the breed examined:

Distichiasis [ ] Persistent pupillary membrane [ ] Nuclear cataract [ ] Choroidal hypoplasia[ ]

Ectopic cilia [ ] Abnormal pigment deposition [ ] Posterior polar sub-capsular cataract [ ] Multifocal retinal dysplasia [ ]

Entropion [ ] Goniodysgenesis [ ] Other cataract [ ] Total retinal dysplasia [ ]

Ectropion [ ] Primary lens luxation [ ] Optic nerve hypoplasia [ ] GPRA-like appearance [ ]

Multiocular defects [ ] PHPV [ ] Posterior segment coloboma [ ] Central PRA-like lesions [ ]

Corneal lipid deposition [ ] Other conditions (specify) [ ]

INHERITED EYE DISEASE STATUS – SCHEDULE A BREEDS ONLY

This section applies only to those conditions in the breeds specified in Schedule A of the Procedure Notes current on the day of examination. These results will be sent to the Kennel Club and/or ISDS as appropriate.

CONGENITAL

(CEA) Collie eye anomaly
- chondrodial hypoplasia [ ]
- coloboma [ ]

(MRD) Multifocal retinal dysplasia

(TRD) Total retinal dysplasia

(CHC) Congenital hereditary cataract

(PHPV) Persistent hyperplastic primary vitreous

(G) Goniodysgenesis

'Clinically affected' signifies that there is evidence of the inherited disease(s) specified, whereas 'Clinically unaffected' signifies that there is no such evidence.

I have today examined the above animal under the BVA/KC/ISDS eye scheme with the results as shown.

Signed: [ ]

Name: [ ]

Date: 08-12-15

Distribution: White – owner
Blue – BVA
Yellow – retained by panellist
Pink – owner's veterinary surgeon

BVA 3/14
Section A – To be completed by owner/agent

KC Registered Number: CMKU / 5AV5 / 12

KC Registered Name: ATWA PETTS WOLF

Breed: SAAKLOSNIK VIČAK

Name of owner: PAUL COLLINS

Sex: FEMALE

Date of birth: 19.05.12

Address: 

Sire: TACHUNGA KAZOS WAKANDA

Dam: BLUE EYES PRINCESS Z MOLU ES

I hereby declare that (NB: DELETION OF ANY OF THESE ITEMS INVALIDATES THIS CERTIFICATE)

(a) The particulars above are correct and relate to the dog submitted for radiographic examination

(b) This dog is a minimum of one year old and has not previously been scored under this Scheme

(c) I give permission for a copy of the certificate to be sent to the geneticist retained by the breed society or other representative body

(d) I give permission for the results of the examination to be used at a future date for the purpose of statistical research

(e) I give permission for the results to be published and included on the relevant KC documents

Owner’s/Agent’s signature: 

Date: 13.10.13

Section B – To be completed by submitting veterinary surgeon

Microchip/Tattoo no.: 939000010311763

I certify that the radiograph relating to the dog identified above was taken on the following date: 13.06.13

and in conformity with the provisions of the Hip Dysplasia Scheme Procedure Notes

Veterinary surgeon submitting radiograph: FORA VENCE

Address: AIRPORT INDUSTRIAL ESTATE WICK CHATHAM

Post code: KWI 4GS

Veterinary Surgeon’s Signature: FORA VENCE

F/MRCVS Date: 13.10.13

Section C – To be completed by scrutineers

Certificate of Scoring

<table>
<thead>
<tr>
<th>HIP JOINT</th>
<th>Score Range</th>
<th>Right</th>
<th>Left</th>
</tr>
</thead>
<tbody>
<tr>
<td>Norberg angle</td>
<td>0-6</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Subluxation</td>
<td>0-6</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Cranial acetabular edge</td>
<td>0-6</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Dorsal acetabular edge</td>
<td>0-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cranial effective acetabular rim</td>
<td>0-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acetabular fossa</td>
<td>0-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caudal acetabular edge</td>
<td>0-5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Femoral head/neck exostosis</td>
<td>0-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Femoral head recontouring</td>
<td>0-6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTALS (max possible 53 per column)</td>
<td></td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Total score (max possible 106)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

We hereby certify that the score of the radiograph submitted for the dog identified above was produced using the scoring criteria of the BVA/Kennel Club Hip Dysplasia Scheme.

Signed: FORA VENCE F/MRCVS

Signed: FORA VENCE F/MRCVS

Date: 09 JUL 2013

NB The scores represent the opinion of the BVA appointed scrutineers for the radiograph submitted. The lower the score, the less evidence of hip dysplasia present. Please consult the current procedure notes and breed mean score sheet for relevant details (available from BVA)
# Test Result

**Sample ID:** 1510-W-31297  
**Result Date:** 14/10/2015

<table>
<thead>
<tr>
<th>Veterinary Surgeon</th>
<th>Owner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>RICHARD JONES</td>
</tr>
</tbody>
</table>

## Animal Details

<table>
<thead>
<tr>
<th>Animal</th>
<th>Microchip No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>CANINE</td>
<td>939000010311763</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name</th>
<th>Tattoo No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIWA PETIS WOLF (ISLA)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Breed</th>
<th>KC Reg.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAARLOOS WOLFDOG</td>
<td></td>
</tr>
</tbody>
</table>

| Sex  | |
|------||
| FEMALE |      |

| D.O.B. | |
|--------||
| 19/05/2012 | |

## Sample

<table>
<thead>
<tr>
<th>Sample Material</th>
<th>Sample Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>SWAB</td>
<td>06/10/2015</td>
</tr>
</tbody>
</table>

## Test

**Test Name:** 8142 Dwarfism (Pituitary Dwarfism / Hypopituitarism )

## Result

<table>
<thead>
<tr>
<th>Genotype</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/Dw (Carrier)</td>
<td>The examined dog is heterozygote for the mutation described to cause Pituitary Dwarfism.</td>
</tr>
</tbody>
</table>

This dog carries one copy of the healthy gene and one copy of the mutated gene.

This dog will pass the mutated gene on to its offspring with a 50% probability.

The result is only valid for the Saarloos Wolfdog, Czechoslovakian Wolfdog and German Shepherd breeds.

The current result is only valid for the sample submitted to our laboratory.