

BASIC FRENCH BULLDOG HEALTH REPORT

| | | | | | | | | | | | | | | |
|--|--|---------------------------------|-------------------------------|------------------|-----------------------------|----------------------|-----------------|--|-------------------------------|-------------------------|-----------------|--|----------|--|
| Dog's Kennel Club Name | | | | | | | | | | | | | | |
| Kennel Club Registration No. | | | | | | | | | | D.O.B | | | | |
| Microchip No. | | | | | | | | | | | | | | |
| Owner's Name | | | | | | | | Email | | | | | | |
| Owner's Address | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Dog / Bitch | | Neutered/entire | | | | Coat Colour : | | | | | | | | |
| Weight | | Body Condition Score | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | | |
| Heart: Normal on auscultation | | | Y | N | Comment | | | | | | | | | |
| Basic Breathing Assessment | | | | | | | | | | | | | | |
| Breathing : Dog at Rest | | | Good | | | Acceptable | | | Poor: | | | | | |
| Breathing : After 3 mins brisk walk | | | Good | | | Acceptable | | | Poor: | | | | | |
| Temperature at time of breathing test : | | | Comments on breathing: | | | | | | | | | | | |
| Nostrils (refer to Nostril Grading Sheet) | | | Open | | Mild | | Moderate | | Severe | | Comments | | | |
| Eyes (if Yes to any condition, please use comment box to provide further details) | | | | | | | | | | | | | | |
| Excessive Tearing | | Y | N | Entropion | | Y | N | Distichiasis | | Y | N | Please comment whether present in Left (L) Right (R) or Bilateral (B) | | |
| Eyes of unequal size | | Y | N | Ectropion | | Y | N | Pannus | | Y | N | | | |
| Enlarged third eyelid | | Y | N | Dry eye | | Y | N | Corneal Scarring | | Y | N | | | |
| Comments : | | | | | | | | | | | | | | |
| Ear canal | | Open | | Narrow | | Closed | | Please comment whether present in Left (L) Right (R) or Bilateral (B) | | | | | | |
| Hearing Established | | | Y | N | | | | Recommend BAER test if hearing not established | | | Y | N | | |
| Skin | | Good | Y | N | Inflamed area's | | Y | N | Hair Loss/bald patches | | Y | N | | |
| Patella Score | | Right | | Normal | | Y | N | Luxation Grade if No | | 1 | 2 | 3 | 4 | |
| | | Left | | Normal | | Y | N | Luxation Grade if No | | 1 | 2 | 3 | 4 | |
| Spine | | Any palpable abnormality | | | | Y | N | Comment | | | | | | |
| Tail | | Tail present? | | | In turned? | | | Mobile? | | | | | | |
| Temperament | | Good? | | | Signs of aggression? | | | | Excessive shyness ? | | | | | |
| Vet's Comments | | | | | | | | | | Veterinary Stamp | | | | |
| | | | | | | | | | | | | | | |
| Signature of vet | | | | | | | | | | | | Date | | |

The above dog shows the physical characteristics as marked. The assessment and grades are not a guarantee against any hereditary or acquired conditions that may develop in the future. The Basic Breathing Assessment component of this form is for your information only, your dog is not given a breathing grade. It should not be confused with the official Kennel Club Respiratory Function Grading which must be carried out by an approved assessor and is a requirement of the BRONZE level.

*Upon completion of your Basic Health Check - Please forward the original form to the Health Scheme Administrator for verification.
Vanessa Bryant, 34 Somersham, Welwyn Garden City, Herts. AL7 2PZ. Please include ONE Large Letter Stamp for returning your certificate and 4 x 2nd Class stamps to cover the administration costs of the scheme.*

Nostril Grading Examples

