

Confirmation of diagnosis form: "Boxer kidney disease (JKD)"

(upper section to be completed by owner)

Registered name Pet name.....

Date of birth..... Sex (D/B)..... Colour.....

Sire.....

Dam.....

Copy of full pedigree provided – **yes/no**; Age of KD onset..... Survival to.....

Attending veterinary surgeon

Consulting specialist

Owner consent

I agree that stored blood samples may be used for genetic (DNA) research.

I agree that the above information, along with relevant clinical details, may be shared with other researchers/geneticists for the study of kidney disease in Boxers. I am aware that this information may be published, but without names of individual dogs or owners. The identities of individual dogs will be known to geneticists, breeders and veterinary researchers to facilitate genetic counselling & to limit the impact of this disease on the breed in the future.

Owner name/address (please print)

.....

Telephone/email

Signature..... Date.....

Confirmation of diagnosis *(to be completed by veterinary surgeon)*

I confirm that I have examined the above-named Boxer and/or examined its records and that the clinical signs and results of diagnostic tests are consistent with a diagnosis of a kidney disease.

Veterinarian name/address (please print)

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Telephone/email

Major sign(s)

Criteria used for diagnosis (please indicate); please add these details if possible/available - further details may be added overleaf if required:

Blood tests

Urine analysis..... Urine culture.....

Ultrasound

Postmortem histopathology

Signature..... Date

Please return the form to: Dr BM Cattnach, Downs Edge, Reading Road, Harwell, Oxfordshire OX11 0JJ

Tel/Fax: 01235 835410;

email brucecatt8@gmail.com