



## Certificate of eye examination

European College of Veterinary Ophthalmologists

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ECVO reg.no. Examination

PL-101716

ECVO reg.no. examiner

PL-1006

## Animal

Name	PEACEFULL HENRI JUNIOR V. HESCOS LEO'S		
Breed	Leonberger	Breedclub	
Registration no.	PKR.II-162790		
Microchip no.	528140000929529		
Date of birth	31/03/2024	Sex	<input type="checkbox"/> Female <input checked="" type="checkbox"/> Male
		Colour	GOLD
		Tattoo	

## Owner/agent

Name	JAROSLAW ZIELINSKI		
Address	UL. PODLEŚNA 16		
Country	PL	Post code	95-045
		Town	CHOCISZEW

By registering the animal mentioned above on the ECVO HED platform for the ECVO eye examination, the relevant person (owner/breeder) has accepted terms & conditions and privacy policy on the ECVO HED platform.

## Examination

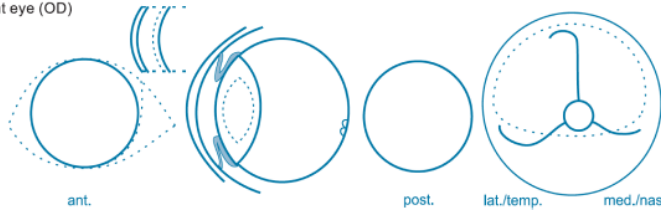
Date	02/10/2025
Method minimal	Mydriatic, indirect ophthalmoscopy and binocular biomicroscopy >= 10x
Optional	<input checked="" type="checkbox"/> Examined before dilatation <input checked="" type="checkbox"/> Gonoscopy (without mydriatic)

## Identification

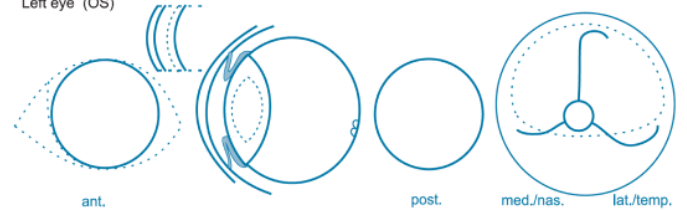
Check microchip/tattoo	<input checked="" type="checkbox"/> Correct	<input type="checkbox"/> Incorrect/unreadable	<input type="checkbox"/> Absent
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Other methods and comments:

## Right eye (OD)



## Left eye (OS)



Descriptive comments

15. Other lens opacity:	<input type="checkbox"/> punctata <input type="checkbox"/> suture line tip <input type="checkbox"/> suture line <input type="checkbox"/> nuclear ring <input type="checkbox"/> nuclear fiberglass/pulverulent	8. ICAA : PLA	<input type="checkbox"/> mild <input type="checkbox"/> moderate <input type="checkbox"/> severe
		ICA	<input type="checkbox"/> narrow (moderate) <input type="checkbox"/> closed (severe)

Eye disease no: ☐ Severe

## Results for the known or presumed hereditary eye diseases

	UNAFFECTED	suspicious/ undetermined	AFFECTED
1. Persistent Pupillary Membrane (PPM)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> iris lens <input type="checkbox"/> cornea lamina
2. Persistent Hyperpl. Tunica Vascularis Lentic/Primary Vitreous (PHTVL/PHPV)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> grade 1 <input type="checkbox"/> grade 2-6
3. Cataract (congenital)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Retinal Dysplasia (RD)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> (multi)focal geographical total
5. Hypoplastic-/Micro-papilla	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Collie Eye Anomaly (CEA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> choroid, hypoplasia <input type="checkbox"/> coloboma <input type="checkbox"/> other
7. Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. IrdoCorneal Angle Abnormality (ICAA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> mild <input type="checkbox"/> moderate <input type="checkbox"/> severe

## Results valid for 12 months

	UNAFFECTED	suspicious/ undetermined	AFFECTED
11. Entropion / Trichiasis	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Ectropion / Macrophthalmos	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Distichiasis / Ectopic cilia	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Corneal dystrophy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Cataract (later onset)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> cortical <input type="checkbox"/> post. pol. <input type="checkbox"/> nuclear
16. Lens luxation (primary)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Retinal degeneration (PRA)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Other	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Interpretation

\* "Unaffected" signifies that there is no clinical evidence of the presumed inherited eye disease(s) specified, whereas "affected" signifies that there is such evidence.  
\*\* "Undetermined" The animal displays clinical features that could possibly fit the presumed inherited eye disease(s) mentioned, but the changes are inconclusive.  
\*\*\* "Suspicious" The animal displays minor, but specific signs of the presumed inherited eye disease(s) mentioned. Further development will confirm the diagnosis.

## FOR FURTHER INFORMATION: P.T.O.

## Examiner

Name Anna Cisło-Sankowska  
Examiner, authorized by ECVO

The undersigned has today examined the above mentioned animal for the hereditary eye disease scheme with the results as shown.

The certificate is valid without signature of the examiner.

The authenticity and validity of the certificate can be checked by scanning the QR code (left side).

