

THE AFFENPINSCHER CLUB

Patella Subluxation Testing Form For Affenpinschers over 12 months of age

Registered name of Dog: _____

_____ KC Reg. No. _____

Sex _____ Date of Birth _____ Microchip/Tattoo No. _____

Sire _____ KC Reg. No. _____

Dam _____ KC Reg. No. _____

Owner's name _____

Address _____

I hereby declare that the dog I have submitted for examination is the one described above.
I agree that the result may be published for Affenpinscher Club purposes – YES/NO

Signed _____ Date _____

Veterinary Surgeon's Declaration

I confirm that I have checked the microchip/tattoo number of the dog and the information above with the Kennel Club Registration Document. At the time of examination I was unable to detect any evidence of surgical interference/intervention in either stifle. The Affenpinscher is over 12 months old.

Weight of Dog _____ Normal/Overweight/Underweight Neutered: YES/NO

The above dog was checked for patella luxation using the Putnam 1968 scoring system as detailed overleaf.

Score: LEFT _____ (Range 0 – 4) RIGHT _____ (Range 0 – 4)

Any relevant comments _____

Name _____ Address _____

Signature _____ Date _____