

Centronuclear Myopathy (CNM)
Hereditary Myopathy of the Labrador Retriever

PTPLA gene test result

A buccal swab from:

Call name: *****

Registered: NULL

with the number: *****

with Identification: Microchip 4B1C107C17

certified by a veterinarian? Yes

has been received at the Alfort School of Veterinary Medicine on

2010-01-04

DNA was extracted, analyzed and has been shown to contain

Two PTPLA gene copies with no insertion in exon 2

>> clear of the CNM mutation and
not at risk for transmitting the deleterious gene <<

and as a consequence received the CNM database registration number :

LR-CNM10-010-F-PIV

Signature:

Dr Laurent Tiret

Date: **2010-01-08**

more information on <http://www.labradorcnm.com>



University of Minnesota

Veterinary Diagnostic Laboratory
College of Veterinary Medicine
1333 Gortner Avenue
St. Paul, MN 55108

1-800-605-8787
612-625-8787
Fax: 612-624-8707
e-mail: vdll@umn.edu
www.vdl.umn.edu

Accession Number: D10-026467

Owner: JETTE, ALAIN & DUSSAULT,
SOPHIE
320 WHIMBEY
ST LAMBERT,

Veterinarian:

Dr. Isabelle Berube
Hopital Veterinaire de la Prairie
641 Chemin De St-Jean
La Prairie, QC J5R2L2

Site:

Received: 06/08/2010

Reference:

Species: Canine
Breed: Labrador Retriever
Age: 11/12/09 **Sex:** Female
Weight:

Diagnostic Report: Genetic Test for Canine Exercise Induced Collapse (EIC)

Specimen From: Memphre' Shining Breeze

With Identification: 4B1C107C17

With Registration Number: SR59803201
1832383

ID Verified by Veterinarian: Yes

Result: Clear

See following page for interpretation.

Orthopedic Foundation for Animals (OFA) International DNA Based Genetic Database: To register your result with the OFA, make a copy of this result page, sign below, and mail WITH FEE to:

Orthopedic Foundation for Animals
2300 E Nifong Blvd
Columbia, MO 65201-3806

or FAX to: 573-875-5073

I hereby certify that the sample submitted was of the animal described on this application. I authorize the OFA to verify any attached laboratory reports with the issuing lab. I further authorize the laboratory issuing the attached documentation to verify the reported test results with the OFA upon their direct request. I authorize the OFA to release all information on the test results thus placing the results in the public domain and I hereby release OFA from any and all liability associated with the release of test information.

Signature of owner or authorized representative: _____

Fees

- Submission fee individual.....\$15.00
- A litter of 3 or more submitted together.....\$30.00 total

Kennel rate: Individuals submitted as a group, owned co-owned by the same person

- 5 or more individuals.....\$7.50 each

Payments can be made by check, money order (U.S. funds drawn on a U.S. bank), cash, Visa, or MasterCard, payable to the Orthopedic Foundation for Animals.

Visa/MasterCard Number

Name on Card

Exp Date

CVV (security code)

Affected dogs at any age are no charge

Interpretation

Clear: Your dog is clear of the DNM1 gene mutation highly associated with EIC. This means that your dog has two copies of the normal gene and therefore is highly unlikely to be susceptible to the classic syndrome of EIC. However,

CANINE HEALTH INFORMATION CENTER

MEMPHRE' SHINING BREEZE

registered name

LABRADOR RETRIEVER

breed

SR59803201

registration no.

F

sex

11/12/2009

date of birth

7/31/2012

date of report

Chip 4B1C107C17

permanent id

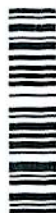
CHIC#: 83170

REQUIRED TESTS

EYES
ELBOW
HIPS

CERF LR-361520 (10)
OFA LR-EL55535F31-VPI
OFA LR-198991G31F-VPI

5/21/2010
7/9/2012
7/9/2012



owner

ALAIN JETTE
SOPHIE DUSSAULT
320 WHIMBEY
ST LAMBERT, QC J4R2A3
CANADA

G.G. Keller, DVM, MS, DACVR

G.G. Keller, DVM, MS, DACVR
Chief of Veterinary Services



Orthopedic Foundation for Animals, Inc.

Terry Warren, Ph.D., JD

Terry Warren, Ph.D., JD
Chief Executive Officer / General Counsel



www.caninehealthinfo.org



ORIGINAL

CANINE EYE REGISTRATION FOUNDATION
1717 S. Philo Rd. Suite #15. Urbana, IL 61802

Telephone: 217-693-4800

Email: cerf@vmdb.org

12/20/2011

BREED	LABRADOR RETRIEVER			CERF #	LR-361520	(2010-6)
REGISTRATION NAME	MEMPHRE SHINING BREEZE					
REGISTRATION NUMBER	1109842	COLOR	BLACK	BIRTH DATE	11/12/2009	SEX F
ALAIN JETTE AND SOPHIE DUSSAULT 320 WHIMBEY SAINT-LAMBERT, QC J4R 2A3 CANADA				DATE EXAMINED	05/21/2010	
				PERMANENT IDENTIFICATION	956 000 001 832 383	
				BREEDER OPTION DIAGNOSIS (details on back)		No inherited eye disease found

THIS CERTIFICATE IS VALID ONLY FOR 12 MONTHS, FROM DATE OF EXAMINATION. Certification relates to PHENOTYPE (appearance) only at time of examination; it implies no clearance for GENOTYPE (possible "carrier") or for heritable ocular disease developing subsequent to date of examination. WARNING: certificate invalid if background not printed in blue ink with the word "original" printed in red ink.