

# Echocardiogram with Color Flow Doppler Breed Screen Clinic

**Open To Purebred Registered Dogs of All Breeds** 

With Board-Certified Cardiologist, Dr. Luis Braz-Ruivo DVM, DVSc, ACVIM (Ca)

Dates: August 4 & 5, 2018

Location: North American Ring Viewing Building Spruce Meadows, 18011 Spruce Meadows Way SW, Calgary, Alberta Sponsored by the Alberta Kennel Club All Breed Show

**PLEASE NOTE:** This clinic is being conducted for the screening of congenital or acquired heart disease in breeding stock. No medical advice will be given to treat any suspected medical condition, or to check the progression of a previously diagnosed condition.

### **Registration Deadline:**

July 31, 2018 or when all spaces have filled

Echo Cost: \$225.00 per dog prior to/on the registration deadline. Contact Cindy or Karen regarding appointment availability after deadline.

\*If you are not entered in the show, you will be required to pay the admission fee to get onto the show grounds\*

\*Payment & registration through DogShow.ca!\*

Other registration/payment options:

> Make cheques/money orders payable to: Luis Braz-Ruivo



Cindy Thomas / Karen LeJeune 219 - 5344 76 Street, Red Deer, AB. T4P 2A6 drluisbrazruivoab@gmail.com

Cindy's Phone: 403-346-9848 / Karen's Phone: 403-318-3358

## **Echocardiogram Clinic Registration Form**

#### **Appointments:**

It is recommended to have an assistant available to take your dog to the scheduled appointment if you are unable to do so yourself due to any unexpected conflicts. Keep in mind that the assistant you choose will be privy to confidential information during your dog's exam. Any person with a large breed dog in the clinic MUST bring an assistant to the dog's appointment to assist in getting the dog on and off the cardiac table.

### **Registration:**

There will be a charge of \$50.00 for all NSF cheques. There are no cancelations or refunds unless the clinic is cancelled. There will be no refunds given for missed appointments. Any overpayment will be considered a donation.

Please print clearly or type out the form below. Complete one registration form per dog and send with payment using one of the methods listed on previous page.

Is this dog entered in the dog show?	Yes No (mandato	ory - please check one)	
Select all that apply: All Breed _	_ Specialty Agi	ility Obedience	Rally Obedience
Class or Classes Entered?			
Registered Name of Dog:			
Registration Number (circle one: AKC C	KC Other):		
Date of Birth (D/M/Y):	Sex:	Breed of Dog: _	
Owner(s):			
Address:			
City:	Province/State	: I	Postal/Zip Code:
Home Phone:	Other Phone (circle one: work or cell):		
Email Address:			
Please indicate which day(s) and time(s) using 1 & 2):	) your dog will be ava	ailable for an appointmer	nt (give us your top two choices by
Saturday, August 4, 2018 Sunday, August 5, 2018	morning morning	afternoon afternoon	
Appointments will be scheduled once the email address you provided above after Ju		dule is out. Your appointm	nent date and time will be sent to the
Office Use Only:			
Appointment Date:	,	Appointment Ti	me: am/pm (circle one)
Gift Certificate(s) Redeemed: N/Y (circ	ele one)	Total Amount of Gift C	Certificate(s) Redeemed: \$