



3230 14th Avenue NW
Olympia, WA 98502
360.866.0931
Fax: 360.867.1269
EyeVetSouthSound.com

Genetic Eye Screen

Please obtain the following information prior to your appointment at the Eye Clinic for a genetic eye screen. The genetic eye screen is **not for pets with known eye problems, therapy for eye disease is not discussed in this screen.** Please arrive 30 minutes prior to your scheduled appointment for pupil dilation. If you desire your breeding animal to be able to apply for **Companion Animal Eye Registry (CAER)** through the **Orthopedic Foundation for Animals (OFA)**, all of the below information will be required for each animal.

- Registered name _____
- Breed _____
- Sex _____
- ID number: (either tattoo or microchip)

- Registration number – AKC or other

- Date of Birth _____
- Owner Name _____
- Co-Owner Name _____
- Phone number _____
- Owner Address _____
- City _____ State _____ Zip _____
- E-mail _____

After the genetic eye screen is completed, an OFA form copy of the exam is sent by the Eye Clinic to OFA to record the exam. The owner of the pet is given an OFA form exam copy as well. **The owner can elect to send this form to OFA if they want to register their pet on the OFA database for Companion Animal Eye Registry.**