

CANADIAN KENNEL CLUB®



CLUB CANIN CANADIEN^{MD}

Purebred Dog Certificate of Registration
Certificat d'enregistrement de chien de race pure

REG. NO.: FD-HS4212953

NAME: KAMI VON MANITOY (GER)

DATE/ISSUE: 17-DEC-2022

BREED: BOXER

DATE OF BIRTH: 01-SEP-2020

LITTER NO.:

COLOUR: FAWN & WHITE, FLASHY MASK

TATTOO MARKINGS AND/OR MICROCHIP NO.: 276098108058193

SEX: MALE

PROGENY: M F

SIRE'S REG'D NO. & NAME: VDH/DBZB-NR. 246542 HECTOR GYMNEMA SYLVESTRE

DAMS REG'D NO. & NAME: VDH/DBZB-NR 244239 GIGI VON MANITOY

BREEDER: OWNER AT BIRTH

OWNER AT BIRTH: TOMASZ MAREK (4568006)

ADDRESS: AM ERLBERG 25

CITY PROV P/C: MARKT SCHWABEN BAYERN 85570

PURCHASE DATE: 09-SEP-2022

OWNER: CRYSTAL MCFARLANE, OKOTOKS, AB, CA

FOREIGN REG NO.: VDH/DBZB 250280

IMPORTER: CRYSTAL MCFARLANE, OKOTOKS, AB, CA

REF NO.:

THE CANADIAN KENNEL CLUB IS AN ANIMAL PEDIGREE ASSOCIATION INCORPORATED UNDER THE ANIMAL PEDIGREE ACT.



HIP-ELBOW DYSPLASIA - INTERNATIONAL CERTIFICATE

X-RAYS MADE ON (radiografski pregled) OF THE DOG (psa)

BREED (rasa) GERMAN BOXER
NAME (ime) KAMI VON MANITON
SEX (pol) MALE

BIRTH DATE (datum rođenja) 01.09.2020.

STOOD BOOK (priplodni registar) BK GERMANY

REGISTRATION N^o (No registra) VDH/DBZB-NR250280

TATTOO/CHIP N^o (letovir No-mikročip No) 276098108058193

OWNER (vlasnik) MARKO PEŠIĆ

ADDRESS (adresa) NIKŠIĆ, CRNA GORA

CLASSIFICATION - KLASIFIKACIJA

HIP (kukovi)	A	B	C	D	E
	ELBOW (laktovi)				
	0	BL	1	2	3

CIRCLE THE RELEVANT
ZAKRUGLITI RELEVANTNO

THE EVALUATION WAS MADE (procena napravljena)

ON (na) 27.05.2022

THE PROCEDURE HAS BEEN PERFORMED ACCORDING TO THE RULES OF F.C.I. - (ova procedura je napravljena po pravilima F.C.I.)

SIGNATURE (potpis)

STAMP (pečat)

SIGNATURE (potpis)

STAMP (pečat)

KSS



DYSPLASIE – KOMMISSION

Veselina Masleše 55, 11000 Belgrade, Serbia
tel/fax 00381112851856, 00381112851923, mobile 0038164 11 57 802
www.vetnovak.com e mail : vetnovak@sbb.rs

Please note that all correspondence will be with the clinic that took the x-rays.
Please indicate: **SPONDYLOSIS EVALUATION** euros 20.00 incl. postage

VIEWS REQUIRED: Lateral View to include T9 – S1 vertebrae.

Submit original for stamping / or photocopy of the Kennel Club Registration Certificate. This reduces the risk of transcription errors and delays in certification. Type or print legibly. Failure to fully complete, errors with dates or illegible writing will result in delays in processing your request. For Certification we require the dog to be at least 12 months of age or 24 months in Boxer dogs. Radiographs MUST be permanently identified in the film emulsion with: 1. Registered name and ID number of the dog. 2. L or R marker 3. Date the radiograph was made. Failure to do so may result in radiographs being returned, unprocessed.

PAYMENT MUST BE SUBMITTED WITH RADIOGRAPHS. Allow 2-4 weeks for results.

RADIOLOGICAL EXAMINATION :

SPONDYLOSIS ☐

Breed **Bokser**

Name **Kami von Manitoy**

Sex **M**

Date of Birth **01/09/20**

Pedigree No **VDH/DBZB nr 250280**

Tattoo No

276098108058193

Microchip

276098108058193

Owner **Pesic Marko**

Address **Trebjska 2/5, Niksic**

I hereby declare that the dog submitted for examination is the one described above. I agree that the registration document be stamped with the date of this examination and that the information obtained may be made available for research purposes and may be published.

Place and date **27.05.2022. Belgrade**

Owner's signature

Referring Veterinary practice details:

Name: **NOVAK**

Address: **Veselina Masleše 55, 11000 Beograd**

Phone: **NOVAK**

Email: **vetnovak@sbb.co.rs**

Stamp of veterinary practice
NOVAK
VETERINARSKA AMBULANTA
BEOGRAD, VESELINA MASLEŠE 55

I certify that the examined dog was deeply sedated / anaesthetized during the examination procedure and I certify that the radiograph(s) submitted is (are) of the dog identified above. I didn't use any technique which is not allowed during the procedure.

Place and date **27.05.2022. Belgrade**

Signature of DVM :

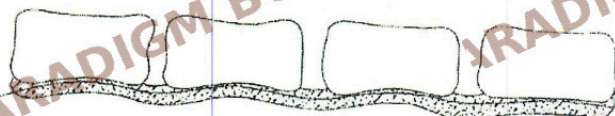
RADIOGRAPHIC EVALUATION - SPONDYLOSIS



0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐



Spondylosis deformans



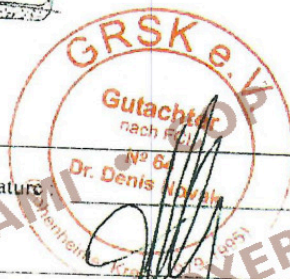
Diffuse Idiopathic Skeletal Hyperostosis (DISH)

Recommendation:

Place and date: **27.05.2022. Belgrade**

For DYSPL SIE KOMMISSION

Signature



NOVAK

Tel/fax: 011 28 51 856, 28 51 923, Mob. tel 0-24h : 064 11 57 802

E-mail: vetnovak@sbb.rs Website: www.vetnovak.com

PATIENT/PACIJENT		OWNER/VLASNIK	
NAME/IME	Kami von Manitoj	NAME/ IME I PREZIME	Marko Pešić
CASE NUMBER /ID	29001	ADDRESS/ADRESA	Nikšić, Crna Gora
AGE/STAROST	1 year/1 godina 9 months/ 9m.		
BREED/RASA	Bokser		
GENDER/POL	M/M	PHONE/TELEFON	
ID	276098108058193	REMARK/NAPOMENA	

(ovom potvrđujem da je gore opisani pas/mačka onaj koga sam doveo na pregled)

(Saglasan sam da informacija koju veterinar dobije ovim pregledom može (anonimno) da se koristi od strane veterinarâ ili genetičara koji se bave srčanim problemima pasa i mačaka)

(Saglasan sam da informacija o pregledu može biti prikupljena od ovlašćene komisije ili odgajivačkog saveta (tamo gde postoji) i objavljena u skladu sa preporukama za rasu)

Date and place(datum i mesto): 27/05/2022 Belgrade

(Za vreme pregleda nisam otkrio prisustvo bilo kakvog očiglednog srčanog šuma) (0/6)

(Otkrio sam srećni šum intenziteta 1/6, koji je sistolični

Normal sinus arrhythmia, frequency 80 b/min, no VPCs in 5 min. trace.

(Normalana sinusna aritmija frekvencije 80 udara/min, bez VPK u zapisu od 5 min.)

□ subcostal (subkostalna)

✓ parasternal (parasternalna)

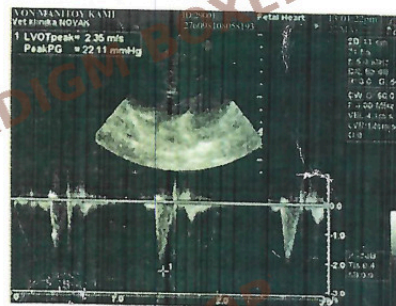
$V_{\max} 1.85 \text{ m/s}$

signs of insufficiency (znaci insuficijencije) yes (da) ☐ no (ne)

flow (protok) laminar (laminarni) turbulent (turbulentni)

Macroscopic changes of the valves (markoskopske promene na zaliscima)

☐ yes (da) ☒ no (ne)



Slobodan Novak preduzetnik
VETERINARSKA AMBULANTA
NOVA
BEOGRAD, Veselina Masleša:

A.pulmonalis

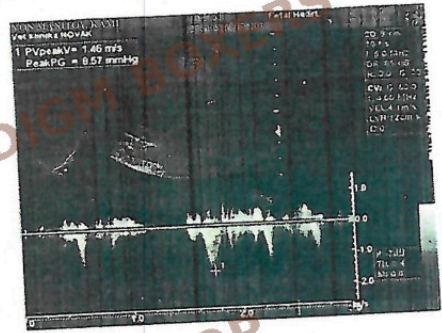
☐ left (leva str)☒ right (desna str)

V max. 1.46 m/s

signs of insufficiency (znaci insuficijencije)

flow (protok) ☒ laminar (laminarni)☐ yes (da) ☒ no (ne)☐ turbulent (turbulentni)

Macroscopic changes of the valves (markoskopske promene na zalsiteima)

☒ yes (da) ☐ no (ne)

Doppler Measurements

	Normal
Aortic Flow (m/sec)	1.85 < 2.0
Aortic PG (mm Hg)	22.1
Pulmonic Flow (m/sec)	1.46 < 1.6
Pulmonic PG (mm Hg)	8.5
M-mode Echocardiographic Measurements	

	Normal	Range
Septum - d (mm)	8.6	9.6 10.6
LV chamber - d (mm)	33.3	35.1 36.6
LV wall - d (mm)	7.2	7.7 8.5
Septum - s (mm)	14.5	14.5 15.6
LV chamber - s (mm)	21.7	21.9 23.1
LV wall - s (mm)	12.0	12.5 13.5
Fractional shortening (%)	32.5	33.0 46.0
Heart rate	80	
Aorta (mm)	23.0	23.2 24.6
Left atrium (mm)	22.0	22.3 23.9
LA/AO	0.9	0.8 1.1
EPSS (mm)	6.6	< 7.7
VSd/LVd	0.22	0.22 0.34

The Results of Heart Examination

Rezultati pregleda srca

Grade/stepen

- ☐ No signs of pulmonic or aortic stenosis / Nema znakova pulmonalne ili aortne stenoze (0)
- ☐ Border line aortic stenosis (2.0-2.25 m/s) Prelazni stepen aortne stenoze 1
- ☐ Mild aortic stenosis (2.25- 3.5 m/s) / Blaga aortna stenoza 2
- ☐ Middle aortic stenosis (3.5 - 4.5 m/s) / Srednja aortna stenoza 3
- ☐ Severe aortic stenosis (more then 4.5 m/s) / Teška aortna stenoza 4
- ☐ Border line pulmonic stenosis (1.8-2.25 m/s) Prelazni stepen pulmonarne stenoze 1
- ☐ Mild pulmonic stenosis (2.25 - 3.5 m/s) / Blaga pulmonalna stenoza 2
- ☐ Middle pulmonic stenosis (3.5 - 4.5 m/s) / Srednja pulmonalna stenoza 3
- ☐ Severe pulmonic stenosis (more then 4.5 m/s) / Teška pulmonalna stenoza 4

Date and place (datum i mesto): 27/05/2022, Belgrade

Examined by (pregled izvršio): Nikoleta Novak, BVSc MRCVS

CANINE HOLTER MONITORING REPORT

www.albamedical.com

HOLTER MONITOR REPORT

Patient Name: McFarlane, Kami	Interp. Physician:
Date of Birth: 9/1/2020	Scan Number: paradigmboxers@gmail
ID : 6969	Date Recorded: 11/8/2024 @ 9:12
Age: 4 Years	Date Processed: 11/10/2024
Sex: M	Recorder Num: 262942
Analyst:	HookupTech:
Physician:	Medications:
Indications: Kami Von Manitoy Boxer	

The patient was monitored for a total of 24:01 hours. The total time analyzed was 21:32 hours. Start time was 9:12am1. There was a total of 117609 beats. Less than 1% were Ventricular beats, there were 0 Supraventricular beats, and patient is not paced.

Mean Heart Rate: 91	Total Beats: 117609
Maximum Heart Rate: 211 @ 10:58pm1	Tachycardia beats: 3578 (≥ 160 BPM) 3%
Minimum Heart Rate: 38 @ 3:52am2	Bradycardia beats: 3425 (≤ 60 BPM) 3%
Pauses: 0 (> 5.0 sec.)	Longest RR at: 2.361 seconds at 6:09am2

Ventricular Ectopy

Total: 7
Single: 7
Pairs: 0
Total Runs: 0
Beats in Runs: 0
Longest Run: 0 @ 9:12am1 (0 BPM)
Fastest Run: 0 @ 9:12am1 (0 BPM)
RonT: 0

Supraventricular - Not Present

RR Variability

SDNN: 308.48 ms
pNN50: 34.393 %
RMSSD: 274.85 ms
SDSD: 274.85 ms

COMMENTS:

PVC Summary : 7 singles, 0 pairs and 0 runs.

Physician's Signature: _____

Date _____

Genetic Testing Results

NCSU Veterinary Cardiac Genetics Lab <cvm-cardiacgenetics@ncsu.edu>

Fri 2022-12-16 11:19 AM

To: Paradigmboxers <paradigmboxers@hotmail.com>

NC State College of Veterinary Medicine

Veterinary Cardiac Genetics Laboratory

1060 William Moore Dr., RB 326
Raleigh, NC 27607



cvm-cardiacgenetics@ncsu.edu
(919) 515-3277

Boxer Combo: ARVC1 Genetic Testing Results

Result Date: 12/16/2022

Owner Last Name: McFarlane

Result: Negative

Animal Name: Kami Von Manitoy

ID: -

For results interpretations, please click [here](#).

Veterinary Cardiac Genetics Laboratory

North Carolina State University
College of Veterinary Medicine

1060 William Moore Dr., RB 326
Raleigh, NC 27607

cvm-cardiacgenetics@ncsu.edu

(919) 513-3314

NC STATE

Genetic Testing Results

NCSU Veterinary Cardiac Genetics Lab <cvm-cardiacgenetics@ncsu.edu>

Fri 2022-12-16 11:19 AM

To: Paradigmboxers <paradigmboxers@hotmail.com>

NC State College of Veterinary Medicine

Veterinary Cardiac Genetics Laboratory

1060 William Moore Dr., RB 326
Raleigh, NC 27607



cvm-cardiacgenetics@ncsu.edu
(919) 515-3277

Boxer Combo: ARVC2 Genetic Testing Results

Result Date: 12/16/2022

Owner Last Name: McFarlane

Result: Negative

Animal Name: Kami Von Manitoy

ID: -

For results interpretations, please click [here](#).

Veterinary Cardiac Genetics Laboratory

North Carolina State University
College of Veterinary Medicine

1060 William Moore Dr., RB 326
Raleigh, NC 27607

cvm-cardiacgenetics@ncsu.edu

(919) 513-3314

NC STATE



Degenerative Myelopathy DNA Test

Case Number: 173058

Owner: Crystal McFarlane

Site 7 Box 45 RR2

Okotoks AB T1S 1A2

Canada

Canine Information

DNA ID Number: **232419**

Call Name: **Kami**

Sex: **Male**

Birthdate: **01/09/2020**

Breed: **Boxer**

Coat Color: **Flashy Fawn**

Registered Name: **Kami von Manitoy**

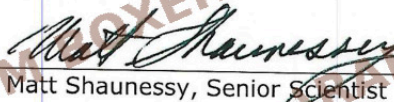
Registration Number:

Microchip/Tattoo: **276098108058193**

Report Date: 12/12/2022

DNA Result: **Clear (2 copies of the normal allele)**

These results are based on data obtained from analysis of unique DNA loci in accordance with the standards and protocols set forth by DDC Veterinary. The accuracy of the result is based on the information and the quality of samples provided by the client. DDC Veterinary does not assume responsibility of errors due to mislabeled or incorrectly sampled submissions.


Matt Shaunessy, Senior Scientist