

## **Heart Testing Results Submission Form**

## For online publication

## PLEASE WRITE CLEARLY AND IN CAPITALS. COMPLETE ONE FORM PER DOG.

## A COPY OF YOUR VETERINARY CERTIFICATE OF HEART TESTING MUST BE INCLUDED WITH THIS FORM.

Name of owner(s):							
Phone no:							
Email address:							
Dog's registered name:							
Dog's date of birth:					Gender: D/E		
Date of test:				•			
Dog's status (please tick):	Super Veteran		IWRT Rescue		N/A		
ECG result:	Normal		Abnormal		Equivocal		
Ultrasound result:	Normal		Abnormal		Equivocal		
Any additional comments (for publication):							
I am the owner or I have the full permission of all the owners in the partnership to submit these results for publication and by submitting them give permission for them to be published on the Irish Wolfhound Health Group website (ww.iwhealthgroup.co.uk).							
Signed			Date				