



Brachycephalic Obstructive Airway Syndrome Certificate

Developed from Liu et al 2016*

Please type or print legibly. Microchip number must be recorded for acceptance

Owner details	
Registered Name	Registration number
Breed	Sex
	Colour
Microchip number	Date of Birth (dd/mm/yy)
Registration number of Sire	Registration number of Dam
Owner(s) Name(s)	
Mailing address	
Phone (Mobile)	Email
tick	I declare that details of the dog described are accurate and relate to the dog tested
tick	I hereby authorise release of the test results to Dogs NZ for publication on this dogs pedigree
tick	I give my consent for these results to be used for the purpose of statistical analysis and scientific research and for the statistical and scientific research to be published.
Signature of Owner	Date

Veterinarian section	
Examining veterinarian's name	Date of current examination (dd/mm/yy)

		Respiratory Noise	Inspiratory Effort	Dyspnoea/Cyanosis/Syncope
Grade 0	Pre ETT	Not audible	Not present	Not present
	Post ETT	Not audible	Not present	Not present
Grade 1	Pre ETT	Not audible or mild	Not present	Not present
	Post ETT	Mild	Not present to mild	Not present
Grade II	Pre ETT	Mild to moderate	Mild to moderate	Not present
	Post ETT	Moderate to severe	Moderate to severe	Mild dyspnoea, cyanosis or syncope not present
Grade III	Pre ETT	Moderate to severe	Moderate to severe	Moderate to severe dyspnoea, may or may not present cyanosis. Inability to exercise
	Post ETT	Severe	Severe	Severe dyspnoea, may or may not present cyanosis or syncope.

I certify that the above - named dog is Grade _____ on the date of examination.

Nasal Stenosis Open Mild Moderate Severe

Has this dog had airway surgery? Yes No Unknown

I certify that the examination was performed according to the above procedure.
 I DID verify microchip information on this dog

Veterinarian Signature	Date
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Vet stamp

Veterinary Information:

Exercise Tolerance Test

Functional grading system of BOAS based on respiratory signs before and after an exercise tolerance test. A 3 minute trot with speed of approximately 6-8 km/hr. Presentation of at least one sign in the highest grade determines the final grading result. Ideally the test should be performed on dogs 12 months or older, but provisional results can be provided for younger dogs. Test should be done within 12 months prior to mating.

1. Respiratory noise is diagnosed by pharyngolaryngeal auscultation.

- Mild: only audible under auscultation
- Moderate: intermittent audible noise that can be heard without stethoscope
- Severe: constant audible noise that can be heard without stethoscope

2. Inspiratory effort

An abnormal respiratory cycle characterised by evidence of increased effort to inhale the air with the use of the diaphragm and/or accessory muscles of respiration and/or nasal flaring with an increase in breathing rate.

- Mild: regular breathing patterns with minimal use of diaphragm
- Moderate: evidence of use of diaphragm and accessory muscles of respiratory
- Severe: marked movement of diaphragm and accessory muscles of respiratory

3. Dyspnoea/Cyanosis/Syncope

Dogs that have had episodes of syncope and/or cyanosis documented by the owners report are classified into Grade III without performing the ETT.

- Mild dyspnea: presents sign of discomfort
- Moderate dyspnoea: irregular breathing, signs of discomfort
- Severe dyspnoea: irregular breathing with signs of breathing discomfort and difficulty in breathing

Nasal Stenosis

The following descriptions were adapted from Liu et al. 2016:

Open: nostrils are wide open

Mild: Slightly narrowed nostrils where the lateral nostril wall does not touch the medial nostril wall. Immediately after the exercise tolerance test (ETT), the nostril wings should move dorsolaterally to open on inspiration

Moderate: The lateral nostril wall touches the medial nostril wall at the dorsal part of the nostrils and the nostrils are only open at the bottom. Immediately after the ETT, the nostril wings are not able to move dorsolaterally and there may be nasal flaring (ie, muscle contraction around the nose trying to enlarge the nostrils)

Severe: Nostrils are almost closed. The dog may switch to oral breathing from nasal breathing with stress or very gentle exercise such as playing." (Liu et al. 2016).

