



**AUSTRALASIAN BOSDOG[®]
SOCIETY INC.**

FORMERLY KNOWN AS
THE AUSTRALIAN BULLDOG SOCIETY

PLEASE FILL THIS FORM IN & SEND WITH FUTURE X-RAYS

LAVELLE'S DIAGNOSTIC IMAGING

ABN755 75202799

80 Ashworths Road, Lancefield 3435 Phone: 03 5429 1682

Canine Hip & Elbow Dysplasia Evaluation

Dr Roger Lavelle

MA Vet MB MRCVS DVR FANZCVS FAVA

Please provide the details below:

Microchip No: _____

Pet Name: _____

Date Radiograph taken: _____

KC Reg No: _____

Name of Owner:

Signature of Owner:

Address:

Postcode _____

Contact No: _____

Email: _____

Please print clearly

Copy of Pedigree must be submitted with the radiographs

The results of the examination will be used at a future date for the purposes of statistical research which will be published.

Please circle which images are being sent: Hips Elbows

Signature of Veterinarian taking images under general anaesthetic: _____

Name and Address of Veterinary Practice: _____

Post Code: _____ Phone No: _____

Fax No: _____ Email: _____

Please print clearly

Fees: Hips & Elbows \$100.00 – Hips \$80.00 – Elbows \$30.00 – Routine Radiological Assessment (Small Animals) \$85.00 – Hips & Spine \$120 - Routine Radiological Assessment Horse \$120.00

Please inform Dr R B Lavelle, 80 Ashworths Road, Lancefield, Victoria, 3435 if you object to the use of the results. Telephone (03) 5429 1682 BH. General enquiries please phone Annie on 0419 104 208

To make Payment: Account Name: Lavelles Diagnostic Imaging:

Please tick - Cheque Direct Debit Bank: CBA Account Name: Lavelles Diagnostic Imaging BSB: 063 541 Account No: 10608568. In the description please enter your name and a copy of receipt.