



Orthopedic Foundation for Animals

2300 E Nifong Blvd, Columbia, MO 65201-3806

Phone: (573) 442-0418; Fax: (573) 875-5073

www.ofa.org, A not-for-profit organization

Call name:	Stella	Coat Color:	Black, White & Tan
Registered name:	Keepsake Snow Avalanche		
Breed:	Biewer Terrier	Sex:	F
ID Number (if any):	900255000599409		
Registration Number:	TS69635702		
Date of Birth (mm/dd/yy):	05/20/24	Date of Exam (mm/dd/yy):	07/22/26
Owner Name:	Vette Hobbs		
Co-Owner Name:	Phone: (725) 920-8241		
Owner Address:	8803 Crosswicks Ct.		
City:	Montgomery Village	State:	MD
Zip/postal code:	20886		
E-Mail (use both lines if needed):	yhobbsrna@gmail.com		

I hereby certify that the animal examined is the animal described on this application, and understand that the results of this exam will be submitted by the examining ophthalmologist to the database for statistical gathering purposes. I understand that only passing results will be released to the public unless the initials of a registered owner or authorized agent appear in the authorization box below which permits the OFA to release non-passing results to the public.

Vette Hobbs
Signature of owner or authorized agent/representative

I hereby authorize the OFA to release the results of the evaluation of the animal described on this application to the public if the results are non-passing (initials) bcb

☒	I DID verify microchip/tattoo on this dog
☐	I DID NOT verify microchip/tattoo on this dog
☐	NO MICROCHIP/TATTOO PRESENT

I certify that I have performed this ophthalmic examination using pharmacological mydriasis, ophthalmoscopy, and biomicroscopy.

Signature: [Signature] ACVO # 511 Date 7/22/26

Diplomate, American College of Veterinary Ophthalmologists

FEES AND CREDIT CARD INFORMATION ON THE BACK OF THE WHITE (OWNER) COPY



1080341

Companion Animal Eye Registry (CAER)

RIGHT EYE	GLOBE	LEFT EYE
☐ microphthalmos	☐	☐
☐ keratoconjunctivitis sicca	☐	☐
☐ glaucoma	☐	☐
EYELIDS		
☐ entropion	☐	☐
☐ ectropion	☐	☐
☐ distichiasis	☐	☐
☐ ectopic cilia	☐	☐
☐ imperforate lacrimal punctum	☐	☐
NICTITANS		
☐ cartilage anomaly/eversion	☐	☐
☐ gland prolapse	☐	☐
☐ plasmoma/atypical pannus	☐	☐
CORNEA		
☐ dystrophy — epithelial/stromal	☐	☐
☐ dystrophy — endothelial	☐	☐
☐ pannus	☐	☐
☐ pigmentary keratitis/keratopathy	☐	☐
UVEA		
☐ uveal cyst	☐	☐
☐ iris coloboma	☐	☐
☐ iris hypoplasia	☐	☐
☐ pigmentary uveitis	☐	☐
persistent pupillary membranes		
LENS		
CATARACT	☐ Incap ☐ Incap ☐ Part ☐ Part ☐ Incap	CATARACT
☐ anterior cortex	☐	☐
☐ posterior cortex	☐	☐
☐ equatorial cortex	☐	☐
☐ anterior sutures	☐	☐
☐ posterior sutures	☐	☐
☐ nucleus	☐	☐
☐ capsular	☐	☐
☐ generalized/complete	☐	☐
☐ resorbing/hypermature	☐	☐
☐ Significance Unknown/Suspect Not Inherited		
☐ posterior Y-suture tip opacities	☐	☐
☐ subluxation/luxation	☐	☐
VITREOUS		
☐ Grades 2+ ☐ Grade 1 ☐ PHPV/PHTVL ☐ Grade 2+ ☐	☐	☐
☐ persistent hyaloid artery	☐	☐
☐ degeneration	☐	☐

Ophthalmologist Name:	Dr. Amy Baker
Ophthalmologist Address:	Animal Eye Care Center
City:	9043 Gaither Road
Phone:	Gaithersburg, MD 20877
Email:	

RIGHT EYE	FUNDUS	LEFT EYE
☐ detached	☐ retinal detachment	☐
☐ geographic	☐ retinal atrophy — generalized	☐
☐ folds	☐ CMR/CMR-like retinopathy	☐
☐	☐ other presumed inherited retinopathy	☐
☐	☐ retinal dysplasia	☐
☐	☐ choroidal hypoplasia	☐
☐	☐ coloboma	☐
☐	☐ optic nerve coloboma	☐
☐	☐ optic nerve hypoplasia	☐
☐	☐ micropapilla	☐
OTHER CONDITIONS		
☐ Unlisted conditions suspected as inherited. Describe in comments		
☐ Unlisted conditions suspected as not inherited		

☒	NORMAL	☒
Comments		

05/14/25

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WHITE = Owner/OFA Registration copy; YELLOW = ACVO Research copy; PINK = ACVO Diplomate copy