



## PennHIP Report

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## Patient Information

<b>Client:</b> Simmons, carla	<b>Tattoo Num:</b>
<b>Patient Name:</b> Tallai Gizmo	<b>Patient ID:</b> 19394350
<b>Reg. Name:</b>	<b>Registration Num:</b>
<b>PennHIP Num:</b> 101152	<b>Microchip Num:</b> 953010000859278
<b>Species:</b> Canine	<b>Breed:</b> LABRADOODLE
<b>Date of Birth:</b> 01 Nov 2015	<b>Age:</b> 10 months
<b>Sex:</b> Male	<b>Weight:</b> 31.7 lbs/14.4 kgs
<b>Date of Study:</b> 29 Sep 2016	<b>Date Submitted:</b> 28 Sep 2016
<b>Date of Report:</b> 29 Sep 2016	

## Findings

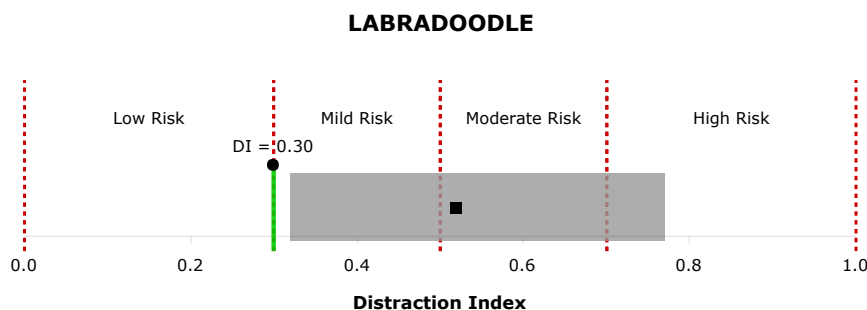
**Distraction Index (DI):** Right DI = 0.28, Left DI = 0.30.  
**Osteoarthritis (OA):** No radiographic evidence of OA for either hip.  
**Cavitation/Other Findings:** None.

## Interpretation

**Distraction Index (DI):** The laxity ranking is based on the hip with the greater laxity (larger DI). In this case the DI used is 0.30.

**OA Risk Category:** The DI is less than or equal to 0.30. This patient is at minimal risk for hip OA.

**Distraction Index Chart:**



**Breed Statistics:** This interpretation is based on a cross-section of 4969 Canine patients of the LABRADOODLE breed in the AIS PennHIP database. The gray strip represents the central 90% range of DIs (0.32 - 0.77) for the breed. The breed average DI is 0.52. The patient DI is the solid circle (0.30).

**Summary:** The degree of laxity (DI = 0.30) ranks the hip within the tightest 5% of DIs for the breed. This amount of hip laxity places the hip at a minimal risk to develop hip OA. No radiographic evidence of OA for either hip.

**Interpretation and Recommendations:**

**Comments:**

Please inform the owners that when the Distraction Index is at or below 0.30 we recommend repeating at some later date (prior to breeding) in order to confirm that the hips are this tight.

We recommend to you, the PennHIP Member, that when the hips appear tight to your eye on future cases, repeat the distraction view at the time of the study to confirm the finding. First, check that the anesthesia is providing sufficient relaxation by a deep toe-pinch [which should not elicit a withdrawal response]. Send both distraction views to us (or all, if more than two are taken).