

General Clinical Examination

Prior to a Dog Show – VDH LV Hessen

In consultation with the Veterinary Authority of the City of Kassel, Dr Purkl As of: July 2026

Under Section 10 No. 2 of the German Animal Welfare Dog Ordinance (Tierschutz-Hundeverordnung – TierSchHuV), it is prohibited to exhibit dogs in which, due to hereditary factors,

- **body parts or organs required for species-appropriate use are absent, unsuitable or altered, resulting in pain, suffering or harm,**
- behavioural disorders associated with suffering occur,
- any species-appropriate contact with other dogs causes pain or avoidable suffering or harm to the dog itself or another dog.

As part of the veterinary clinical examination, a professional and objective assessment of clinical findings is to be carried out. The veterinary findings serve as a basis for determining whether there are indications that the examined dog exhibits extreme breeding traits within the meaning of Section 10 No. 2 of the German Animal Welfare Dog Ordinance. The AGT Guidelines are also used as an aid to interpretation.

NAME / ADDRESS OF THE VETERINARY PRACTICE AND OF THE EXAMINING VETERINARIAN

Veterinary Practice

Examining Veterinarian

KEEPER / OWNER, NAME AND ADDRESS

Keeper / Owner

Date of Clinical Examination

Breed

Date of Birth / Age

Name of Dog

☐ Male ☐ Female

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Dog's Microchip Number

Additional Information

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Dog's Microchip Number

BODY CONDITION

☐ lean ☐ normal weight ☐ obese

GENERAL HEALTH / GENERAL CONDITION

☐ good ☐ reduced / moderate ☐ poor

EYES

Are any of the following present: **ectropion, entropion, exophthalmos, microphthalmos, coloboma (a gap/defect in an ocular structure), excessive tearing / tear staining, irritation or inflammation of the conjunctiva / cornea, cataract, impaired vision or other pathological eye abnormalities?**

☐ Yes, the following abnormalities are present (please provide an exact description / diagnosis and degree of severity)

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☐ No, no eye abnormalities

SKULL, DENTITION, JAWS, NOSTRILS

Are **all teeth** present (42 teeth)?

☐ Yes, 42 teeth ☐ No, the following teeth are missing (please mark missing teeth in the **diagram in the appendix**)

For the following teeth, the attached veterinary documentation confirms that their absence is due to an accident or another non-hereditary cause / disease (e.g. documentation of veterinary tooth extraction):

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Is there a **scissor bite** (normal bite, maxillary incisors positioned closely in front of the mandibular incisors)?

☐ Yes ☐ No, the following is present: ☐ **Undershot bite:** the mandibular incisors are mm in front of the maxillary incisors
☐ **Overshot bite:** the mandibular incisors are mm behind the maxillary incisors, with corresponding malocclusion / impaired dental function

Is **brachycephaly / shortening of the skull** present (shortening of the nose and jaw bones)? **See diagram in the appendix**

☐ Yes, the nose length is:
(measured from the tip of the nose to the stop) ☐ **less** than 1/3 of the skull length (measured from the stop to the occiput)
☐ **more** than 1/3 of the skull length (measured from the stop to the occiput)

☐ No, no brachycephaly

In cases of **brachycephaly**: assessment of the **nostrils** according to **degree of opening / stenosis** (unless the standardised Cambridge exercise test / U7 is already required for the breed concerned):

According to the **grading scheme in the appendix**, the following **degree of opening / stenosis** is present:

☐ Open: nostrils wide open
☐ Mild stenosis: nostril slightly narrowed; the lateral wall does not touch the medial nasal septum
☐ Moderate stenosis: the lateral wall touches the medial septum dorsally; the nostrils are open only at the bottom / floor
☐ Severe stenosis: the nostrils are almost completely closed

Are there palpable **malformations of the skull**, such as an **open fontanelle** (gap in the skull bones)?

☐ Yes ☐ No

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SKIN / SKIN APPENDAGES, COAT

Is complete or partial **alopecia** (hair loss / hairlessness) present?

- ☐ Complete ☐ Partial, hairlessness in the following areas of the body
- ☐ Color Dilution Alopecia (CDA) – hair loss / hairlessness in pigmented areas of skin with a diluted coat colour (black pigment appears blue/grey/silver; brown pigment appears light grey)
- ☐ No, no alopecia

Is **merle colouring** present? Depigmentation (dilution) of the coat, skin and iris: localised dilution of the base colour up to white (irregularly distributed, torn-looking patches of the base colour on a diluted background). More or less extensive depigmentation to white may occur in the head area, sometimes accompanied by blue and/or heterochromic irises. Double merle dogs have an even higher proportion of white ("double merle").

- ☐ Yes If yes: Thorough examination for deafness and impaired vision / blindness (see "Other") and for ocular malformations such as microphthalmos or iris coloboma (see "Eyes") is required.
- ☐ No

Is any of the following present: a **high proportion of white in the head area** or a conspicuously **high proportion of white atypical for the breed in the remaining coat** (> 50% white coat); extreme piebald patterning?

- ☐ Yes, the following characteristics are present:
If yes: Thorough examination for deafness required (see "Other"). The risk of deafness is increased if blue eyes are also present, and likewise if the high proportion of white in the head area includes one or both ears.
- ☐ No, none of these characteristics are present

Is **albinism** present? Absent / severely reduced pigmentation of the eyes, skin, coat and mucous membranes.
White / cream / light grey coat; reddish or light blue eyes.

- ☐ Yes ☐ No

Are **pronounced skin folds** present?

- ☐ Yes, in the following areas:
☐ without signs of inflammation ☐ with signs of inflammation
- ☐ Nein, keine deutliche Hautfaltenbildung

Are **drop ears** present that touch the ground when the nose is lowered?

- ☐ Yes ☐ without clinical / pathological abnormalities
- ☐ with the following abnormalities (e.g. inflammation of the inner / outer ear, impaired self-cleaning of the ear, aural haematoma, etc.)
.....
- ☐ No, no such drop ears

Are **palpable skin invaginations** or **palpable tubular cysts** (dermoid cysts / dermoid sinus) present in dogs with a ridge of hair along the back?

- ☐ Yes ☐ No

RESPIRATORY SYSTEM

Are **respiratory sounds** such as snorting, wheezing, stertor (moist rattling), snoring, difficulty swallowing or excessive panting during mild exercise or at rest detectable?

- ☐ Yes ☐ No If yes, please specify:

In cases of **brachycephaly**: assessment of **respiratory sounds** by auscultation / using a stethoscope (unless the standardised Cambridge exercise test / U7 is already required for the breed concerned):

- | | | | |
|----------------|---|-----------------------|---|
| At rest | ☐ Not detectable, even with a stethoscope | After exercise | ☐ Not detectable, even with a stethoscope |
| | ☐ Detectable only <u>with</u> a stethoscope | | ☐ Detectable only <u>with</u> a stethoscope |
| | ☐ Detectable <u>without</u> a stethoscope | | ☐ Detectable <u>without</u> a stethoscope |

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CARDIOVASCULAR SYSTEM

Did the clinical examination (mucous membranes, pulse, auscultation) reveal any indications of relevant cardiovascular disease requiring further specialised examination?

☐ Yes ☐ No If yes, please specify:

Auscultation: Is a heart murmur detectable?

☐ Yes ☐ No If yes: Cardiac ultrasound and findings / diagnostic report required.

URINARY SYSTEM

Dalmatian only: Are there any indications of **hyperuricosuria** – bladder / urinary stones accompanied by cystitis, haematuria, stranguria, pollakiuria?

☐ Yes ☐ No If yes: Urinalysis / blood test and findings / diagnostic report required.

MUSCULOSKELETAL SYSTEM

Are any of the following pathological findings present?

☐ Yes* ☐ No **Lameness, paralysis / neurological deficits, orthopaedic abnormalities**

☐ Yes ☐ No **Markedly sloping topline / sloping hindquarters** (particularly in the German Shepherd Dog)

If yes: The croup slopes at an angle of degrees to the horizontal.

Movement / gait (hindquarters) is abnormal / unstable / plantigrade

☐ Yes ☐ No

☐ Yes* ☐ No **Indications of hip dysplasia (HD):** abnormalities / restrictions in movement, e.g. instability of the hind legs, swaying / "waddling" gait, lameness

☐ Yes* ☐ No **In brachycephalic breeds with a short tail or a tightly curled/double-curved tail – indications of wedge, block, butterfly or hemivertebrae:** Impaired coordination of movement, pain in the affected section of the spine, ataxia of the hind limbs, impaired ability to stand and walk, muscle atrophy of the hind limbs, paresis, paralysis

In chondrodystrophic ("short-legged") breeds – indications of degenerative intervertebral disc disease / intervertebral disc herniation:

Pain in the thoracic / lumbar spine (particularly at the transition between the two), ataxia or coordination disorders of the hind limbs, muscle atrophy of the hind limbs, impaired ability to stand and walk / paralysis

☐ Yes* ☐ No

Assessment of the postural reaction / proprioceptive positioning response (assessment of both hind limbs)

☐ Response elicitable ☐ Response not elicitable or delayed*

* If such findings are present: A more detailed orthopaedic / neurological examination is required with the aim of reaching a final assessment (including the decision as to whether radiographic examination is required) – findings / diagnostic report required.

OTHER

For dogs with short/stub tails:

☐ Yes ☐ No Is the tail **mobile**?

☐ Yes ☐ No Is the tail length at least **half the distance from the base of the tail to the level of the stifle joint**?
See **diagram in the appendix**

☐ Yes ☐ No Is the tail **tightly / double curled** / a **corkscrew tail** ("screw tail") – i.e. twisted and in some cases ingrown?

Were there any clinical indications of **deafness** or **impaired vision / blindness**?

☐ Yes ☐ No If yes, what indications? Unilateral or bilateral?

If there are indications of deafness: Further assessment by specialised / neurological examination of the ears and, where appropriate, audiometry is required (findings report required). If there are indications of impaired vision / blindness: Further assessment by specialised ophthalmological examination is required (findings report required).

Date

Signature of Examining Veterinarian

Practice Stamp

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DENTITION

Please mark missing teeth in the diagram.

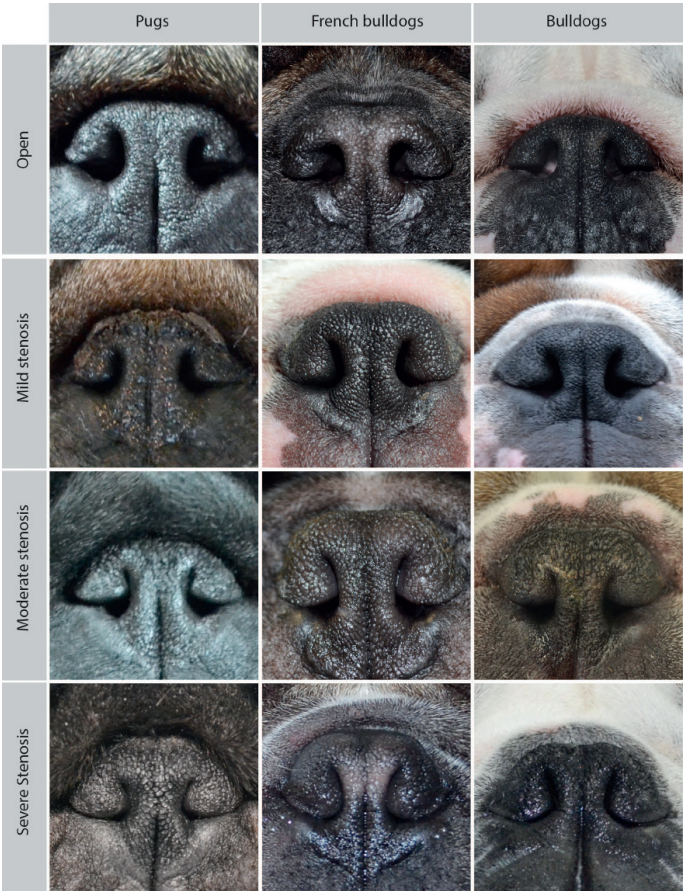
I1	I2	I3	C1	P1	P2	P3	P4	M1	M2
Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐
Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐

I1	I2	I3	C1	P1	P2	P3	P4	M1	M2	M3
Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐	Left ☐
Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐	Right ☐

Diagram: Johannes Willwacher ©

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DEGREE OF NOSTRIL STENOSIS

Illustration based on Liu et al. 2016

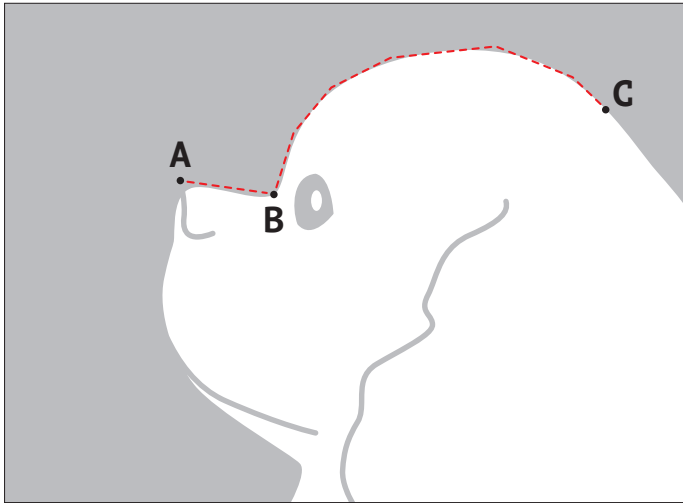
Classification of the Severity of Nostril Stenosis in Brachycephalic Dogs:

- 1. Open: Nostrils wide open
- 2. Mild stenosis: Nostril slightly narrowed; the lateral wall does not touch the medial nasal septum
- 3. Moderate stenosis: The lateral wall touches the medial septum dorsally; the nostrils are open only at the bottom / floor
- 4. Severe stenosis: The nostrils are almost completely closed

Image: https://www.researchgate.net/publication/318842582_Conformational_risk_factors_of_brachycephalic_obstructive_airway_syndrome_BOAS_in_pugs_French_bulldogs_and_bulldogs/figures

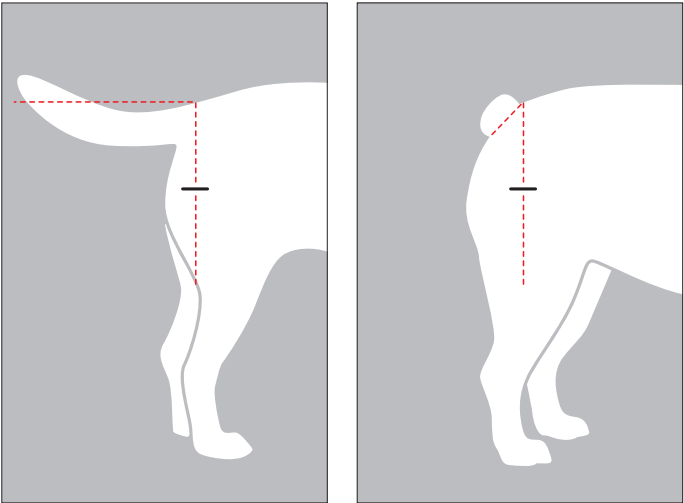
BRACHYCEPHALY / SHORTENING OF THE NOSE

By dividing the nose length (cm) by the skull length (cm), the so-called craniofacial ratio (CFR), i.e. the relative shortening of the nose, is calculated.



TAIL LENGTH

The tail length must be at least half the distance from the base of the tail to the level of the stifle joint.



Diagrams "Shortening of the Nose" and "Tail Length": Johannes Willwacher ©