

ABCA HEF Sponsored BAER Clinic

The ABCA Health and Education Foundation (“HEF”) has agreed to sponsor a BAER clinic to be held in conjunction with the Fetch Gate Farm Sheepdog Trials in Cortland, NY. The BAER clinics will be held on Sunday, July 2nd and Tuesday, July 4th. Testing will be done by Dr. Ellis Leow from Cornell University.

The HEF has agreed to fund the testing of 50 dogs. Dogs must be registered with the ABCA or CBCA and the owner must agree to sign a consent form, fill out a short questionnaire, and supply a copy of the dog’s ABCA or CBCA pedigree. Additionally, a DNA cheek swab will be collected at the clinic.

Preference will be given to dogs which fit in the following categories (if we have more than 50 dogs):

- Dogs previously tested and recommended for follow up
- Dogs not previously diagnosed with EOD whose owners suspect hearing loss
- Dogs not previously BAER tested but with “high risk by pedigree”

Once the 50 spots have been filled, additional dogs can be tested for \$25 per test. Breeds other than Border Collies can also be tested for \$25. This is a very, very reasonable cost for a BAER test and Dr. Leow will be available to test as many dogs as we are able to accommodate over the 2 days of testing. The BAER tests will be done across the street from the trial/camping fields in the Millen’s garage and should take less than 15 minutes per dog.

For more information on the ABCA funded research into Early Onset Deafness (“EOD”) and the Border Collie breed please visit their website: <https://bordercolliefoundation.org/health-and-eduction/deafness-research/> Additional free BAER testing will be done in Virginia at the 2017 USBCHA Sheepdog Finals.

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If you would like to have your dog tested, please fill out the attached form and mail, or email, it to me along with a copy of the dog’s pedigree. If we have more than 50 ABCA/CBCA registered dogs registered for testing I will inform anyone who will not be covered by the HEF funding and you can let me know if you still want testing at \$25 per dog. We have set the testing days on Day 2 of the Open trial and on the Novice day so that we can accommodate as many dogs as would like to be tested.

Mail forms/pedigrees to:

Carolyn West
105 Lynbrook Rd.
Paoli, PA 19301

Or send via email tobyfwest@gmail.com

Questions? Please contact me at tobyfwest@gmail.com or 860-729-0550

Consent Form and Questionnaire for BAER Test and/or DNA Sample Collection

*Name of Owner: _____

*Address: _____

"Email: _____ *Phone: _____

*Dog's Name: _____ ABCA Registration Number: _____

*Dog's date of birth: _____ Dog's Gender: ___M ___F

*This dog is currently (check one): ___hearing normally ___hard of hearing ___deaf

If now deaf, when did you first notice hearing deficit? _____

*Has this dog ever been BAER tested before? ___Yes ___No

*If yes, please give details (date, location, tester, results): _____

*Have any immediate relatives (sire, dam, progeny, littermates, full or half siblings) of this dog been diagnosed with early adult onset deafness (EAOD)? ___Yes ___No

If yes, please give details:

*Is this dog affected by (please mark with an A), known to carry (please mark with a C), or tested normal for (please mark with an N) any other disease or disorder thought to be inherited? ___Epilepsy ___Hip Dysplasia ___CEA ___IGS ___TNS ___Other _____

*Has this dog had one or more distinct episodes of abnormal posture, gait, disorientation or collapse that occurred during or immediately after exercise or excitement? ___Yes ___No

*Has the ABCA HEF collected DNA from this dog at any other time in 2016 or later? ___Yes ___No

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I consent to the provision of the above dog's BAER test results, and the above dog's pedigree, to the ABCA Health & Education Foundation, Inc. (HEF). I understand and agree that the above dog's DNA sample, BAER test results and health questionnaire will be retained by the HEF and may be used for health and genetic research. I further understand that none of the health information or test results will be disclosed to any outside person other than the dog's owner in any form which would permit them to be connected with any individual dog.

Date Printed Name Signature

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BAER date _____ BAER tester _____ DNA sample date & type _____