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LABOKLIN NV · Verlengde Klinkertstraat 6 · NL-6433PL Hoensbroek

Nederlandse Herdershonden Club
Vijfsprongweg 126
6741 JC Lunteren
Nederland

Report

No.: 1903-N-03008
Date of arrival: 18-03-2019
Date of report: 22-03-2019

Patient identification:	dog	female	* 03.03.18
	Hollandse Herder Korthaar		
Owner / Animal-ID:	Hout van den, K.		
Type of sample:	Swab		
Date sample was taken:	16-03-2019		

Name: **Esenivery Bilou**
Stud book no.: **NHSB3113609**
Chip no.: **528140000710116**
Tattoo no.: **---**

Spongi Degeneration with Cerebellar Ataxia (SDCA2) - PCR

Result: Genotype N/N

Interpretation: The examined animal is homozygous for the wildtype-allele. It does not carry the causative mutation for SDCA2 in the ATP1B2-gene.

Trait of inheritance: autosomal-recessive

Scientific studies found correlation between the mutation and symptoms of the disease in the following breeds: Belgian Shepherd, Dutch Shepherd

Sampling:

The following impartial person (veterinarian, breed warden, or similar) signed the form for the sampling and identity check of the animal:

A. Heijkamp

sample ID: 1903-N-03008



You have requested a certificate for the ordered genetic testing. Please thoroughly verify the animal and owner data provided to you. Any corrections afterward can only be carried out in accordance with prior written confirmation from the veterinarian. Please note that an extra charge will be invoiced separately upon changes to an already issued certificate.

The current result is only valid for the sample submitted to our laboratory. The sender is responsible for the correct information regarding the sample material. The laboratory can not be made liable. Furthermore, any obligation for compensation is limited to the value of the tests performed.

There is a possibility that other mutations may have caused the disease/phenotype. The analysis was performed according to the latest knowledge and technology.

The laboratory is accredited for the performed tests according to DIN EN ISO/IEC 17025:2005. (except partner lab tests).

*** END of report ***

Drs. J. Vis