

Cruciate ligament examination form

Kogan Pet Insurance has a waiting period of 6 months for cruciate ligament conditions, which means that if such a condition develops during this waiting period (or was pre-existing at the policy commencement date), your policy will not cover cruciate ligament conditions. This waiting period may be waived by us depending on the results of a veterinary examination of your pet.

To apply for this waiting period to be waived:

- Your vet must examine your pet and complete and sign this form
- The completed and signed form must be received within 14 days of the examination date

1. Your details

Policy number:

Title: First name: Surname:

Address:

Suburb/City: State: Postcode:

2. Pet's details (One form to be completed per insured pet)

Pet's name: Species: Dog Cat

Breed: Pet's age / date of birth:

Important

You will receive written confirmation from us in the event that the waiting period for cruciate ligament conditions in respect of your pet is reduced. Unless you receive such written notification, the waiting period in respect of the pet identified on this form remains at 6 months for cruciate ligament conditions starting from the policy commencement date.

Veterinarian to complete sections overleaf

For any questions, please call 1300 001 738 between 8.30am and 8pm (AEST) Monday to Friday (excluding public holidays).

Please note that the completion of this form does not mean an automatic waiver of the cruciate ligament waiting period.

3. To be completed by veterinarian

Veterinarian's instructions: Please physically examine the pet as indicated. (No other diagnostic tests are required). Please tick YES or NO that best describes your findings, and add further details in the NOTES section at the end of this form. Please keep detailed notes in this pet's clinical records.

Policy owner's name:

Pet's name:

Date of Examination:

How long has the pet been a client of your clinic? Less than 6 months More than 6 months

Owner history

Has the owner ever reported a history of the pet limping, or difficulty rising?
(If YES please provide a copy of the clinical records) Yes No

Clinical observation – observe the pet walking, trotting, and rising from a seated position

Were there observable signs of clinical lameness? Yes No

Clinical examination – the clinical examination is performed without sedation or anaesthetic

Is there joint laxity in the knee joint? Detected by

Positive Cranial Drawer Test Yes No

Tibial Compression Test Yes No

Pain or discomfort on palpation

Is there pain on palpation of the hind legs including hips and low spine?
(If YES indicate the areas where pain was elicited on palpation in NOTES) Yes No

Joint abnormalities

Is there crepitus, or any other abnormality, in the joints? Yes No

Are the joints thickened, or are there indications of past injury or surgery? Yes No

Conclusion

Are there any findings or evidence of cruciate disease? Yes No

Veterinarian's notes (please note location and nature of any positive findings)

4. Examining veterinarian's declaration

I certify that the animal described on this certificate, and named above, has the clinical history and clinical signs as detailed above, and that the information provided by me on this form is truthful, accurate and complete.

Signature of veterinarian:

Date:

Signature of pet owner:

Date:

Name of attending veterinarian
and practice (please print)

Please mail this completed form to Kogan Pet Insurance, Locked Bag 9021, Castle Hill, NSW 1765