Pet Insurance

Woolworths

Cruciate Ligament Examination Form

Your Woolworths Pet Insurance policy has a waiting period of 6 months starting from the initial commencement date of the policy for cruciate ligament (and related) conditions. This waiting period may be reduced to the Policy Commencement Date 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 (at your expense) on or after the Policy Commencement Date.
· **The completed and signed form must be received within 14 days of the examination date.**

Your (Policy owner) Details:

Woolworths Pet Insurance Policy Number:

Title: First Name: Surname:

Address:

Suburb: State: Postcode:

Pet's Details: (Please complete one form for each insured pet)

Name: Dog: Cat:

Breed: D.O.B:

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 starting from the Policy Commencement Date.

Vet to complete sections overleaf

The completed and signed form must be received within 14 days of the examination date.
Please mail completed form to Woolworths Pet Insurance, Locked Bag 9021, Castle Hill, NSW 1765 or email to petinsurance@woolworths.com.au or Fax BOTH SIDES OF THIS FORM to 1300 367 229

To Be Completed by Veterinarian

Veterinarian's Guidelines: 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.

Owner's Surname:

Pet's name: Examination Date:

Owner History
Has the owner ever reported a history of the pet limping or difficulty arising?
(If yes please provide a copy of the clinical records)   Yes [ ]   No [ ]

Clinical Observation
Observe the pet walking, trotting and arising from a seated position
Were there any observable signs of clinical lameness?   Yes [ ]   No [ ]

Clinical Examination
The clinical examination is performed without sedation or anesthetic
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 anterior cruciate disease?   Yes [ ]   No [ ]

Veterinarian's Notes (Please note location and nature of any positive findings)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

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 note that issuance or completion of this form does not constitute an automatic waiver of the cruciate ligament waiting period.