# **Application form**



Reduction of Brachycephalic Obstructive Airway Syndrome (BOAS) Exclusion Period

**1300 952 790** Monday to Saturday 8:00am - 8:00pm (AEST)

A six (6) month Exclusion Period applies for Specified Conditions, including BOAS and/or any Illness or Injury that results from conditions of this syndrome. You may submit this Application Form to apply for the Exclusion Period to be reduced in relation to Brachycephalic Obstructive Airway Syndrome (BOAS).

For Us to consider whether a reduction of the Exclusion Period can be provided We will require this Application Form to be completed in full and Your Pet's medical history. You will be reasonably required to aid in the process of obtaining Your Pet's medical history, for example by providing details of any Vets Your Pet has seen in the past.

Once We have completed our review of Your application, We will confirm the outcome to You and if applicable provide You with an updated Certificate of Insurance which lists condition(s) We have agreed to reduce the Exclusion Period for and by how much.

#### What You need to do:

- Arrange a Vet to examine Your Pet (at Your expense) and have them complete Part Two of this form\*.
- Note that depending on Your Pets temperament, some aspects of the exam may not be possible for Your Vet to complete.
- If completing with other forms, you may need to allow 20-30 minutes for Your Vet to complete Your Pet's exam and associated paperwork.
- It is Important It is Important to provide Us Your fully completed application form within 14 days of the exam date to avoid needing to have it completed again.

\* If you are a vet, then you cannot do the examination yourself. This also applies if the examining vet is a co-owner of the policy or a relative.



You complete Part 1



Have Your Vet examine Your Pet and complete Part 2



Within 14 days send the completed form and full vet history to support@petsy.com.au



Receive an updated Certificate of Insurance

# **Need more information?**

We're here to help you. So, if you have any questions or need more information, please contact us by calling 1300 952 790 or emailing support@petsy.com.au

Petsy Pty Ltd (ABN 54 633 343 058, AR 1277359) ('Petsy') distributes and promotes Petsy Pet Insurance as an authorised representative of Knose Financial Services Pty Ltd (ABN 88 620 795 735, AFSL 536651) ('Knose'). Knose is an underwriting agency acting under a binding authority as an agent for the insurer; (a) Pacific International Insurance Pty Ltmited (ABN 83 169 311 193) ('Pacific) in relation to policies from 01 March 2023 or have an anniversary renewal date from 18 March 2023, and (b) the Australia branch of Allied World Assurance Company, Ltd (ABN 83 169 311 193) ('Allied World') in relation to policies protoices purchased between 17 February 2022 and 28 February 2023 (inclusive) or newed between 01 March 2023 and 17 March 2023 (inclusive). In all aspects of arranging this product, Petsy and Knose act as an agent of Pacific/Allied World (as the case may be) and not as your agent. Any advice contained on this website is general advice only and has been prepared without taking into account individual objectives, financial situation or needs and you should consider the appropriateness of any such advice, the Product Disclosure Statement ('PDS'') (Allied World PDS) and the Target Market Determination ('TMD'') (Allied World TMD) available via www.petsy.com.au or by calling 1300 952 790 before making a decision to acquire, or to continue to hold, the product.

# PART ONE - Policyholder to complete

| YOUR DETAILS         |  |
|----------------------|--|
| Policy number:       |  |
| Policyholder's name: |  |
| Contact number:      |  |
| Pet's name:          |  |
| Pet's breed:         |  |

# YOUR PET'S VETS

Please list current and past Vets Your Pet has seen:

| Vet clinic name | Suburb |
|-----------------|--------|
|                 |        |
|                 |        |
|                 |        |
|                 |        |
|                 |        |
|                 |        |

# YOUR REQUEST

Has your pet shown any symptoms, clinical signs or received treatment/surgery relating to the conditions of BOAS?

🔵 Yes 🔵 No

If you have answered "Yes" to the question above, please indicate the date/s and describe the treatment and/or symptoms noted. For example: 20/03/17, surgery to resect the soft palate and widen the nostrils.

## YOUR DECLARATION

#### Your Duty to take reasonable care not to make a misrepresentation

You must take reasonable care not to make a misrepresentation to Us. This responsibility applies until We issue You with a Policy for the first time or agree to renew, extend, vary/change, or reinstate Your Policy.

You must answer Our questions honestly, accurately and to the best of Your knowledge. A misrepresentation includes a statement that is false, partially false, or which does not fairly reflect the truth. It is not misrepresentation if You do not answer a question or if Your answer is obviously incomplete or irrelevant to the question asked.

The responsibility to take reasonable care not to make a misrepresentation applies to everyone who will be insured under the policy. If You are answering questions on behalf of anyone, We will treat Your answers or representations as theirs.

Whether or not You have taken reasonable care not to make a misrepresentation is to be determined having regard to all relevant circumstances, including the type of insurance, who it is intended to be sold to, whether You are represented by a broker, Your particular characteristics and circumstances We are aware of.

If You do not meet the above Duty, We may reject or not fully pay Your claim and/or cancel Your Policy. If the misrepresentation was deliberate or reckless, this is an act of fraud, and We may treat Your Policy as if it never existed.

If Our information or questions are unclear, You can contact Us on 1300 952 790 or visit www.petsy.com.au.

You understand that Petsy will assess the information provided and based on that information will decide whether the Exclusion Period can be reduced, and further that Petsy is under no obligation to approve Your application.

In addition to the above declaration You authorise any Vet services provider who is listed in this Application Form to provide to Petsy any details We may require to assess Your application.

 $\bigcirc$  I understand this form must be provided to Petsy within 14 days of the vet examination to remain valid.

| Policy holder's signature |  |
|---------------------------|--|
| Date                      |  |

Remember to return Part One and Two of this form. Petsy will request the full Vet treatment history from Your Vet(s) if You do not have it.

## **VET EXAMINATION**

#### Are you aware of any history of BOAS surgery?

🔿 Yes 🔵 No

If yes to any of the above, please provide further details:

Functional grading of BOAS, aligned with The University of Cambridge BOAS Grading System. Please refer to Appendix A: Veterinary Guidance, Appendix B: Functional Grading and Appendix C: Nostril Grading Examples.

### PHYSICAL EXAMINATION \*please note pre- and post- exercise test, if different.

| Respiratory patterns*        | 0 | Normal      | 0 | Inspiratory<br>effort | 0 | Yes                  | 0 | Yes                |
|------------------------------|---|-------------|---|-----------------------|---|----------------------|---|--------------------|
| Nostrils*                    | 0 | Open        | 0 | Mild<br>stenosis      | 0 | Moderate<br>stenosis | 0 | Severe<br>stenosis |
| Stertors (low pitch noise)*  | 0 | Not audible | 0 | Mild                  | 0 | Moderate             | 0 | Severe             |
| Stertors (high pitch noise)* | 0 | Not audible | 0 | Mild                  | 0 | Moderate             | 0 | Severe             |
| Inspiratory effort*          | 0 | Not present | 0 | Mild                  | 0 | Moderate             | 0 | Severe             |
| Cyanosis and/or syncope*     | 0 | Νο          | 0 | Yes                   |   |                      |   |                    |
| Heart/lung auscultation:     | 0 | Normal      | 0 | Abnormal              |   |                      |   |                    |
| Functional grading           | 0 | Grade 0     | 0 | Grade I               | 0 | Grade II             | 0 | Grade III          |

The above dog shows the physical characteristics and underwent the procedures as marked. The above report and its results are not a guarantee against any hereditary or acquired condition that may develop in the future.

## **EXAMINING VET DECLARATION**

| Date of examination:    | 1 | 1 |                   |
|-------------------------|---|---|-------------------|
|                         |   |   |                   |
| Attending veterinarian: |   |   |                   |
|                         |   |   |                   |
| Vet Practice:           |   |   |                   |
|                         |   |   |                   |
| Vet registration:       |   |   | State Registered: |

I certify that I've taken reasonable care not to make a misrepresentation and the answers and statements made in this form and any supporting documentation has been answered honestly, accurately and to the best of my knowledge.

A misrepresentation includes a statement that is false, partially false, or which does not fairly reflect the truth. It is not misrepresentation if You do not answer a question or if Your answer is obviously incomplete or irrelevant to the question asked.

#### Veterinarian's signature:

# **APPENDIX A - Veterinary Guidance\***

# **VETERINARIAN EXAMINATION INSTRUCTIONS**

#### 1: Initial examination prior to exercise test

The dog should be kept as calm as possible with gentle restraint. If the dog is stressed, please allow a period of time to calm. If the dog cannot be calmed, then the initial examination should be graded according to the post-exercise criteria. Auscultation is performed directly over the larynx from the side, avoiding any upward pressure on the pharynx and larynx. Head should be in a neutral position, not flexed.

#### 2: Exercise test

This is designed to keep the dog active for 3 minutes. The dog should be encouraged to trot at 4-5 miles per hour by the assessors or the owners, but not pulled on the lead. Toilet stops should be accommodated. If the dog has reasons that it cannot manage this pace (e.g osteoarthritis, obesity, anxiety), a fast walk should be attempted.

#### 3: Examination after the exercise test

The dog should be auscultated immediately following the exercise test.

#### 4: Functional grading

The clinical grading is based on respiratory signs before (pre-ET) and immediately after the exercise est (post-ET). The highest grade from any of the three categories (respiratory noise, inspiratory effort, dyspnoea/ cyanosis/syncope) should be given as the final grade.

# **APPENDIX B - Functional Grading\***

| FUNCTIC   | ONAL GR | ADING   |                         |   |  |  |  |
|-----------|---------|---|-------------------------|---|--|--|--|
| Grade 0   |         | Clinically unaffected. Free of respiratory signs; annual health check is suggested if the dog is under 2 years old.   |                         |   |  |  |  |
| Grade I   |         | Clinically unaffected. Mild respiratory signs of BOAS but does not affect exercise performance. Annual health check is suggested if the dog is under 2 years old. |                         |   |  |  |  |
| Grade II  |         | Clinically affected. The dog has a clinically relevant respiratory signs and requires management, including weight loss and/or surgical intervention.             |                         |   |  |  |  |
| Grade III |         | Clinically affected, and should not be bred. Severe respiratory signs of BOAS. The dog should have a thorough veterinary examination with treatment.              |                         |   |  |  |  |
|           |         | Respiratory noiseª Inspiratory<br>effort <sup>b</sup>   |                         | Dyspnoea/Cyanosis/<br>Syncope <sup>c</sup>                              |  |  |  |
| Grade 0   | Pre-ET  | Not audible   | Not present             | Not present   |  |  |  |
|           | Post-ET | Not audible   | Not present             | Not present   |  |  |  |
| Grade I   | Pre-ET  | Not audible to mild stertor,<br>and/or moderate intermittent<br>nasal stertor when sniffing <sup>d</sup>  | Not present             | Not present   |  |  |  |
|           | Post-ET | Mild stertor or stridor, and/or<br>moderate intermittent nasal<br>stertor when sniffingd, and/<br>or intermittent gentle stertor<br>when panting <sup>d</sup>     | Not present to<br>mild  | Not present   |  |  |  |
| Grade II  | Pre-ET  | Mild to moderate stertor or stridor   | Not present to moderate | Not present   |  |  |  |
|           | Post-ET | Moderate to severe stertor or stridor   | Moderate to severe      | Dyspnoea; cyanosis or<br>syncope not present                            |  |  |  |
| Grade III | Pre-ET  | Moderate to severe stertor or stridor   | Moderate to<br>severe   | Dyspnoea; may or may not<br>present cyanosis. Inability<br>to exercise. |  |  |  |
|           | Post-ET | Severe stertor or stridor   | Severe                  | Dyspnoea; may or may<br>not present cyanosis or<br>syncope.             |  |  |  |

a Respiratory noise (stertor and/or stridor) was diagnosed by pharyngolaryngeal auscultation. Mild: only audible under auscultation; moderate: intermittent audible noise that can be heard without stethoscope; severe: loud, constant audible noise that can be heard without stethoscope.

**b** An abnormal respiratory cycle characterized by evidence of increased effort to inhale the air in with the use of diaphragm and/or accessory muscles of respiration and/or nasal flaring with an increase in breathing rate. Mild: minimal use of diaphragm; moderate: evidence of use of diaphragm and accessary muscles of respiration; severe: marked movement of diaphragm and accessary muscles of respiration.

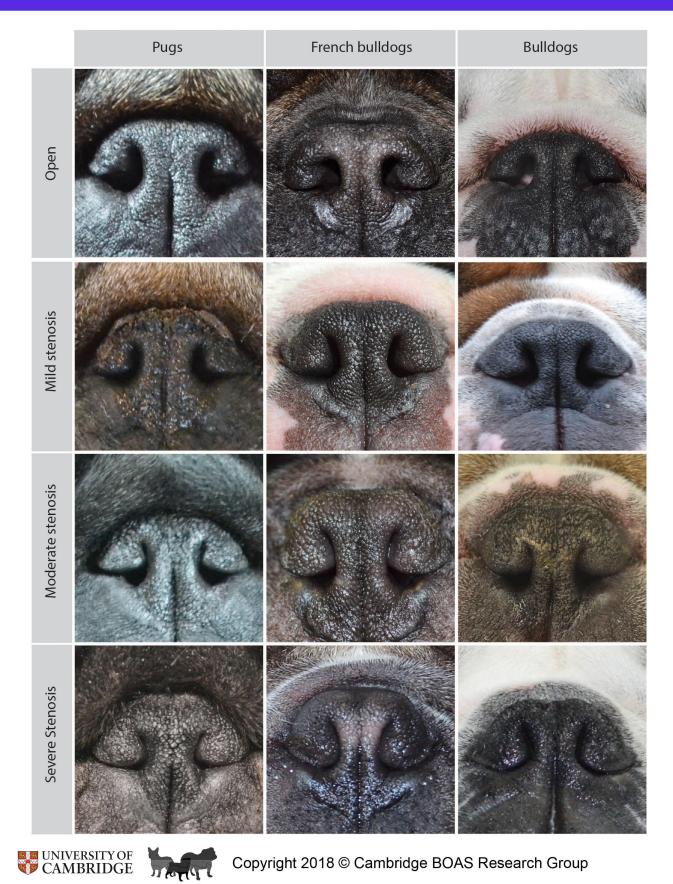
c Dogs that have had episodes of syncope and /or cyanosis as documented by owner's report are classified into Grade III without ET. Dyspnoea: irregular breathing, signs of discom-fort, and laboured breathing.

d Dogs with moderate intermittent nasal stertor when sniffing have similar BOAS index (objective respiratory function) to dogs only with mild respiratory noise, therefore, these dogs are considered Grade I

\*Department of Veterinary Medicine, University of Cambridge. Brachycephalic Obstructive Airway Syndrome (BOAS) study Respiratory Function Assessment Form

# **APPENDIX C - Nostril Grading Examples\***

## **NOSTRIL GRADING EXAMPLES**



Petsy Pty Ltd ABN 54 633 343 058 Phone: 1300 952 790 Email: support@petsy.com.au

https://www.vet.cam.ac.uk/boas/about-boas/recognition-diagnosis