British Veterinary Association/Kennel Club Hip Dysplasia Scheme – Procedure Rules and Regulations

These procedure rules and regulations are intended to explain the BVA/Kennel Club Hip Dysplasia Scheme and to provide helpful instruction to those using the scheme. They are due to be effective from 01 January 2026 and replace all previous documents in relation to the scheme. These rules and regulations may be modified from time to time; please consult the BVA website for the latest version.

Introduction

Hip Dysplasia (HD) is a genetically-transmitted condition but environmental factors may influence the final score achieved. The score does not therefore absolutely reflect the potential for transmission of HD of an individual animal but should be regarded only as an indicator of possible transmission of the condition. For the scheme to be meaningful and successful it is important that images from EVERY dog radiographed be submitted for scoring, whether or not the animal is required for breeding and whatever the state of the hips, in order to provide the widest possible information for use by a geneticist and for generation of estimated breeding values (EBVs). Further information about hip dysplasia and the use of the scoring scheme is available in the Canine Health Schemes section of the BVA website.

1. The scheme

The main purposes of the scheme is the examination of radiographs of hips of dogs for hip dysplasia and the issue of a certificate in respect of that examination. The scheme is open to all dogs and is not restricted to those which are registered with the Kennel Club. The examination is conducted by the evaluation of a radiograph for any anatomical and pathological changes indicative of Hip Dysplasia and a score is recorded. This score, and its relation to the breed median score, is intended to assist dog breeders in their selection of breeding stock. Breeders wishing to reduce the risk of HD should select their breeding stock (both dogs and bitches) only from animals with hip scores BELOW the breed median score. Many clinically sound dogs may have high HD scores and should not therefore be used for breeding. The scheme does not cover any other hereditary or clinical defects which may need to be considered when choosing suitable breeding stock. However, breeders wishing to have their dogs graded for Elbow Dysplasia as well as Hip Dysplasia may have the hips and elbows radiographed at the same time and the submissions sent together. In such cases these procedure rules and regulations should be read in conjunction with those of the BVA/Kennel Club Elbow Dysplasia (ED) Scheme (details available from BVA website).

2. Breed specific statistics

The breed specific statistics include **the breed median (BM) for the last fifteen and five years and the rolling five-year median**, which are calculated from the scoring records of each breed to give a representative overview of the HD status of the dogs scored in that breed. When the certificate is available to the submitting veterinary surgeon, a copy of the current breed specific statistics can be obtained from the BVA website so that the veterinary surgeon may best advise their client regarding the dog's suitability for breeding.

3. Arranging for radiography and submission to the scheme

The dog's owner should approach their veterinary surgeon and request that the hip radiographs should be acquired and submitted for scoring under the scheme. The following procedure should be observed:

a) the **minimum** age of a dog for submission under the scheme is one year. There is no upper age limit;
b) the dog must be permanently identified by either microchip or tattoo;
c) suitable arrangements must be made with the veterinary surgeon for the dog's hips to be radiographed;
d) the following documents must be made available at the time of radiography if it is registered with the Kennel Club (KC):
    i) the KC Registration Certificate of the dog,
    ii) any related transfer or change of name certificate;
e) the Veterinary Surgeon must complete the 'Dog' & 'Owner' sections of the online submission portal, verifying that the details given in these sections relate to the dog being submitted, that the details are correct and granting permission for the results to be used in the ways specified.
f) The owner must be made aware of the terms and conditions, read the declaration and acceptance of this agreement is confirmed by the Veterinary Surgeon during the submission process.

NB Once a certificate of HD scoring has been issued for a dog, the dog's radiographs may not be resubmitted for scoring under the scheme other than via an Appeal (see section 8).

NB If a dog has had surgery on either hip joint or has evidence of previous severe injury resulting in obvious arthritis, radiographs cannot be submitted for scoring only the unaffected hip under the BVA/KC Scheme. A unilateral score cannot be given as all scores are published and require a score for each hip and a total to be entered. The owner, with the advice of their own veterinary surgeon, may or may not decide to breed this dog. The potential consequence of the damaged hip to the dog in question (dog or bitch) would need to form part of the decision process regarding breeding (effective service or pregnancy respectively).

4. Procedure for radiography of the hips

NB Submissions that are found not to comply with the BVA/KC Scheme Procedure Rules and Regulations, in particular with respect to radiation safety, will be rejected. Gross or repeated non-compliance may result in suspension of the submitting practice/veterinary surgeon from the BVA/KC Schemes. BVA reserves the right to inform HSE of any suspected breach of current ionising radiation legislation. Should a suspected breach be identified on any submission, the submitting practice/veterinary surgeon must inform their Radiation Protection Adviser of the event.

A ventrodorsal (VD) radiograph of the pelvis is required for scoring. The veterinary surgeon should radiograph the dog's hips as indicated below.

4.1 Protection of Personnel

The Guidance Notes for the Safe Use of Ionising Radiations in Veterinary Practice (2017), which are based on the Ionising Radiations Regulations 2017 explain that only in EXCEPTIONAL circumstances should dogs be manually restrained for radiography. Since the radiography of dogs for the purposes of this scheme would not constitute exceptional circumstances:

a) it is NECESSARY to employ general anaesthesia, narcosis or deep sedation to enable only mechanical (i.e. nonmanual) restraint for the positioning of the animal;
b) collimation of the primary beam should be clearly visible on the radiograph;
c) the X-ray beam must be projected vertically downwards, perpendicular to the table top.

4.2 Positioning

A standard position for radiography must be employed as follows:

a) the dog must be placed on its back with the pelvis over the middle of the cassette or detector and the X-ray beam centred on the midline between the hips (i.e. the centring point should be at the level of the cranial edge of the pubis, by palpation). The pelvic area must lie flat on the table and not be artificially tilted.
b) in order to avoid lateral rotation, the body should be supported in a straight line using a cradle or sandbags. The thorax must be upright and symmetrical since tilting of any part of the dog's body is likely also to cause tilting of the pelvis and asymmetry in the appearance of the hips. Lateral tilting of the pelvis can be recognised as a disparity in appearance between the ilial wings and obturator foramina on the two sides. It may be corrected by raising the pelvis slightly on the side on which the ilial wing appears wider and the obturator foramen narrower on the radiograph.
c) the hind legs should be fully extended and adducted so that the femora lie as near parallel to each other as possible: they must not be over-adducted (i.e. they must not converge towards the stifles).
d) the legs should be inwardly rotated so that the patellae lie centrally in the femoral trochlear grooves i.e. the stifles are upright.
e) suitable ties or tape placed around the distal femora or stifles should be used to achieve correct adduction and inward rotation; ties must not be placed around the proximal femora, pelvis or hips. Radiographs showing restraint at this level will be rejected.

f) poor positioning which allows either lateral or longitudinal tilt of the pelvis or incorrect positioning of the femora may prevent accurate radiological assessment of the hips; such radiographs may be rejected.
g) To obtain correct positioning, please refer to the "how to" positioning videos on the BVA YouTube channel.

4.3 Markers and identification

The following information MUST be included on digital images:

a) **BOTH**
   i) the Kennel Club Registration Number (from the top right-hand corner of the KC Registration Certificate) for dogs registered with the KC (**no other form of identification for KC registered dogs is acceptable**). For dogs not registered with the KC, identification as used by the veterinary practice, other registering body or breed club may be used **AND**
   ii) microchip or tattoo number
b) the date of radiography
c) left and/or right marker(s).

NB Further images will be requested by the CHS team for any radiographs which are not correctly identified during the quality assurance stage.

4.4 Image quality

Correct exposure is essential to provide a radiograph of good diagnostic quality. When radiographing a large or overweight dog it is usually necessary to use a grid to minimise the effects of scattered radiation on the image. The image should show good radiographic definition and contrast, and the dorsal acetabular edges (DAE) should be visible superimposed by the femoral heads. The radiograph should be checked for correct positioning, exposure, and image quality while the dog is still restrained in case a further radiograph needs to be taken.

4.5 Uploading Images

When making your submission, you can upload your radiographs directly to this online portal. All radiographs must be in a DICOM (.dcm) format - all other image types including JPEG, TIFF, EPS and GIF will not upload.

DICOM files are typically large and how much time it will take to upload to this portal will depend on a number of factors including your internal practice network and internet connection. We suggest you shouldn't try to upload multiple submissions across lots of browser windows at the same time as this will cause your uploads to slow down.

Digital systems typically save radiographs with long numerical file names. This makes it tricky to identify them when you try to upload them to the portal. To make this easier we suggest saving the dog name as part of the file name. For example: "MillieGillonHip1.dcm ". It is important that each file is saved under a unique name because files with an identical name cannot be uploaded.

5. Submission

The procedure for submission under the scheme is as follows:

a) The veterinary surgeon is responsible for uploading the images and providing the correct details (as the owner would want to see them appear on the completed certificate) on the submission portal.

NB The veterinary surgeon should check that the breed, colour, and sex of the dog correlate with those details on the KC Registration Certificate. The veterinary surgeon should also check that the details on the KC Registration Certificate have been correctly entered onto the CHS portal.

6. Scoring

The procedure for scoring under the scheme is as follows:

a) Scrutineers, appointed by BVA, meet frequently to score the radiographs. Two scrutineers agree the score for each radiograph;
b) for each hip joint a score is derived by evaluation of nine separate features by employing a set of defined criteria. The final score is the sum of the points awarded for each of the nine radiographic features of both hip joints. The minimum score for each hip is 0 and the maximum is 53, which gives a total range of 0-106. The LOWER the score the less the degree of Hip Dysplasia evident.

NB If there appear to be any inconsistencies or inaccuracies with the owners or dogs details during the quality assurance stage, the CHS team will contact the veterinary practice with relevant comments, prior to scoring.

6.1 Reject radiographs

If a radiograph is rejected, the fee will not be refunded and will require a subsequent radiograph submitted for the dog. It must be accompanied by a further fee (see Schedule 1).

7. Results

The results of scoring are normally available to the submitting veterinary surgeon within one - two weeks from receipt by BVA of the correct submission. The arrangements are as follows:

a) once a submission has been scored by the CHS scrutineers, a locked PDF copy will be made available in the Submission history section of the portal. Veterinary surgeons will be able to download a copy and pass on a copy to the dog owner. The results will also be published on the Kennel Club website if the dog is registered with the UK Kennel Club.
b) relevant details may be sent to a geneticist for statistical analysis or creation of EBVs as arranged by BVA.

7.1 Requests for results

Owners can request to receive direct email updates from CHS on the progression of their submission. Owners should let their veterinary surgeon know that they would like to receive updates and the veterinary surgeon is then responsible to select this feature when making a submission.

a) Pending results:
   i) an owner must contact the submitting veterinary surgeon, NOT BVA, for results issued under the scheme;
b) Past results:
   i) results for KC-registered dogs which have previously been published are available on the Kennel Club website;
   ii) any results which have not been published should be sought directly from the owner(s) of the dog;

8. Appeals procedure

An owner has a right to appeal with regard to the results of a HD score. The procedure is as follows:

a) any application for appeal against the result of a HD score must be lodged by the owner to the submitting veterinary surgeon **within 45 days** of the BVA scored date.
b) the veterinary surgeon who originally took the radiographs and submitted them to scheme, will then need to find the relevant submission on the online portal under Submission history, and then commence the appeals procedure by selecting 'appeal' and following the relevant prompts.
c) the radiograph will be re-scored by two further pairs of scrutineers and then by the Chief Scrutineer, whose decision will be final.
d) the final result will then be relayed to the submitting veterinary surgeon by email and this result replaces the original certificate.
e) please be aware that the appeal process may endorse, raise, or lower the score. The cost of an appeal is £150.00 and the process can take up to 4 weeks.

Schedule 1

Charges as of 1 January 2026

The scale of fees as of 1 January 2026 is set out on the BVA website. These charges do not include the cost of radiography and may be changed from time to time. Any changes will be notified by further communication.

NB Radiographs which are judged by the scrutineers as unsuitable cannot be scored. BVA will not refund submission fees for rejected radiographs

Schedule 2

BVA/KC Hip Dysplasia Scheme: Panel of Scrutineers as of 1 January 2026

The BVA appointed panel of scrutineers detailed below may be changed from time to time.

Mrs E A BAINES MA VetMB DVR DipECVDI FHEA DipLCM MRCVS (Chief Scrutineer)
Dr K BRADLEY MA VetMB PhD DVR DipECVDI MRCVS
Dr G W BROWN BVM&S DSAS(Ortho) MRCVS
Mr S CLARKE BVM&S DSAS(Ortho) DipECVS MRCVS
Dr J V DAVIES BVetMed PhD DVR DipECVS DipECVDI FRCVS
Dr R DENNIS MA VetMB DVR DipECVDI FRCVS
Prof M E HERRTAGE MA BVSc DVSc DVR DVD DSAM DipECVDI Dip ECVIM FRCVS
Mr J E F HOULTON, MA VetMB DVR DSAO FRCVS
Mr P MAHONEY BVSc (Syd) DVR DipECVDI CertVC FHEA MRCVS
Mr B M TURNER BVSc (Massey) DVR DipECVS CertSAO MRCVS