

The undersigned veterinary, Lieske Baudhuin, declares that the foal described below has been examined and that this form has been completed to the best of his/her knowledge.

Name foal: CARTINUS VAN LIETAKKA 7 Chip nr: 931100004795033
Gender: colt filly Date of birth: 23/02/2022
Color: Bay Pedigree: GARIBIS - ARGENTINUS
Owner: _____
City: _____

1. How are:

State of nutrition good normal inadequate
General Appearance good normal inadequate
Coat conditions good normal inadequate
Comments: _____

2. Are there any defects in:

Eyes no yes defects
Teeth no yes defects oversite _____ mm
Nose no yes defects
Discharge from the nose no yes defects
Comments: _____

3. Is the respiration normal?

yes no
If not, what is the defect? _____
Have you observed any spontaneous coughing? no yes
Comments: _____

4. Are there any symptoms which indicate a poor or abnormal digestion?

no yes
Comments: _____

5. What is the state of the heartbeat and pulse at rest and after trot?

Are there any heart murmurs? normal aberrant
 no yes

6. Are there any defects concerning the limbs and hooves such as defective hoof shape, thickening of tendons or bones or enlargement of any joints?

Are there any limb deformities? no yes, see comments
 no yes, see comments
Comments: _____

7. Are there any defects of the external genitalia? if so, what are they?

no yes
if stallion: 2 testicles yes no
testicles descended yes no
Comments: _____

8. Is there any sign of an umbilical or a inguinal hernia?

no yes
Comments: _____

9. Does the foal show defects in walk and/or trot? if yes, what are the defects?

no yes
Comments: _____

10. Are there any other symptoms of sick ness, defects or faults that must be indicated for sales?

if so, which ones? yes no
Comments: _____

Date: 21/06/2022
Name: Lieske Baudhuin

Place: Leke
Signature and stamp: Lieske Baudhuin
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