

Mark Deuss
 Veterinary Surgeon

Steyvershofstraat 37
 3640 Kinrooi (B)
 Tel. 0(031)6 537 537 01
 mark.deuss@hotmail.com

Examination Report

"LA ESSENCIA - W"
 (CONNECT X DIARADO)

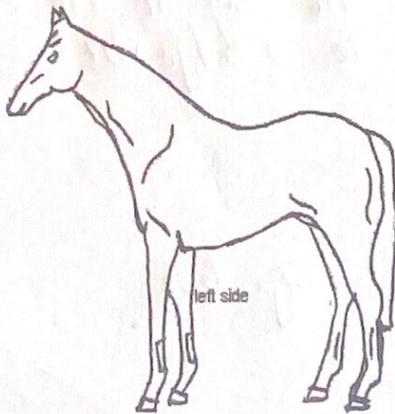
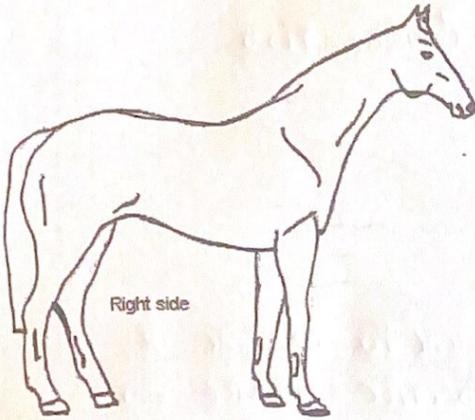
Examination for the purpose of purchase, sale insurance

Company: _____
 Horse/Pony is used for: SPORTS
 Client: _____
 Address: _____
 Postal code and town: _____
 Buyer Seller Owner: _____
 Present Yes/No _____

Description

Race or Type: KWPN
 Pedigree no.: 528003201606491
 Age: 2016
 Sex: FEMALE
 Shoulder height: _____
 Level of training: SPORTS
 Colour: BAY
 Outline: _____

cf. studbookpapers!

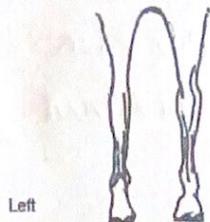


Hind rear view

fore rear view



Right



Right

General Examination

Build and posture good/deviant: _____
 Feeding condition good/deviant: _____
 Skin and hair good/deviant: _____
 Pulse in condition of rest/possibly after labour: no
 Respiration in condition of rest/possibly after labour: no
 Type of respiration normal/deviant: _____
 Mucous membranes normal/deviant: _____
 Lymph glands normal/deviant: _____
 Eyes normal/deviant: _____
 Mouth normal/deviant: _____
 Spontaneous cough present/not present: _____
 Larynx normal/sensitive: _____
 Cicatrice corne operation: present/not present: _____

Further clinical examination

| | not deviant | deviant |
|---------------------------|-------------------------------------|--------------------------|
| Respiratory system | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Laryngoscopy if necessary | <input type="checkbox"/> | <input type="checkbox"/> |
| Circulation system | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Digestion system | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Urogenital system | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Nervous system | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Motion system: | | |
| Inspection | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Palpation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Percussion | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Neck | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Withers | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Back | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Groin | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Left forefoot | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Right forefoot | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Left hind leg | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Right hind leg | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Fronts hoofs | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Horn quality | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Hoof percussion | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Hoof visitation | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

equal not equal

| | | |
|--|-------------------------------------|--------------------------|
| | not deviant | deviant |
| Walking on hard ground | | |
| straight line | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Left small volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Right small volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Trotting on hard ground | | |
| straight line | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| left small volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| right small volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Trotting on soft ground | | |
| left volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| right volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Cantering/Gallopping on soft ground | | |
| left volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| right volt | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Number: LA ESSENCIA - W

After the examination blood was taken to search for illegal practices.
If necessary laboratory results:

INTERMITTENT STRINGHACT

IN CONSIGNATION

Bending tests

Tightening of lower foot or leg

Left forefoot not sensitive/sensitive
 Right forefoot not sensitive/sensitive
 Left hind leg not sensitive/sensitive
 Right hind leg not sensitive/sensitive
 Trotting off after two minutes bending

LF - + +/- +/+ +++
 RF - + +/- +/+ +++
 LH - + +/- +/+ +++
 RH - + +/- +/+ +++
 L - + +/- +/+ +++
 R - + +/- +/+ +++

Hock:

Fixing the kneecap

L not possible / possible
 R not possible / possible

FINAL CONCLUSION

CLINICAL IN GENERAL A
POSITIVE ADVICE ON
THE DAY OF THE EXAMINATION
ie 20/21 JAN 2022

if necessary conductivity anaesthesia in consultation with the owner:

The examination was carried out and reported by Mark Deuss, Veterinary surgeon at Kinrool on: (date) 21/Jan/2022

Results of the X-ray examination

| | good | fair | bad |
|--------------|--------------------------|--------------------------|--------------------------|
| Navicular LF | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Navicular RF | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fetlock LF | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fetlock RF | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fetlock LH | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fetlock RH | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hock L | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hock R | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Stifle L | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Stifle R | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(Signature and stamp)

Mark Deuss
 Veterinary Surgeon
 Steyvershoofstraat 87
 8940 Kinrool (B)
 Tel. 0031 6 597 597 01

Necessary results of any other x-ray examinations

EXAMINATION FOR BREEDING PURPOSES:

NO SIGNIFICANT ABNORMALITIES