



DR VETERINAIRE J. LABRIFFE

N° ordre 21413

EIRL - RCS BOULOGNE SUR MER 798941167- SIRET 79894116700024
2 Rue du Mauroy 62240 LONGFOSSE 06 33 47 69 11 j.labriffe@gmail.com

EXAM REPORT

HORSE NAME : MESSCATINO PS

Date : November 22th 2022

| Horse data | |
|------------|---|
| IDENTITY | SIRE Number : Birth : 4/23/2017 Coat : bay Gender : gelding Chip : 276020000526764 Age : 5 |
| USES | Jumping |

| BUYER | OWNER |
|-------|-------|
| | |



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| Clinical exam | | | | | |
|---|-------------------------------------|--------------------------|--------------------------|--------------------------|---|
| General exam (Normal: N, Suspect : S, Abnormal : A, Unrealized : NR) | | | | | |
| | N | S | A | NR | Observations |
| 1. General condition | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Temperature – Skin - Scar – Behaviour | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | T (°C) : 37,3 |
| 3. Sensory organs – Vision - Facial Reflexes – | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Mucus membranes– Tooth – droppings | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 5. Digestive auscultation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Vessels – Pulse Cardiac auscultation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | CR : 36 Digital pulse : absent Auscultation : no heart murmur , no cardiac arrhythmia today |
| | N | S | A | NR | |
| 7. Respiratory tract - Nods | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. Pulmonar auscultation – Bag test - Cough | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | RR : 20 No spontaneous no trigger cough |
| 9. Umbilicus – External genital organs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Deal breaker defects | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Coggins : no search |
| 11. Vaccinations : | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Influenza, tetanus and rhinopneumonia (April 2022) |



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| Locomotor system (Normal: N, Suspect : S, Abnormal : A, Unrealized : NR) | | | | | | |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|---------------------------------|
| 12. Morphology | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 13. Tendons – Muscles – Backbone | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 14. Inflammation _ passive flexions | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Moderate oedema on distal hindlimbs | |
| 15. Foot – Shoeing | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No schoe | |
| Navicular test | | | | | | |
| 16. Straight : walk and trot | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 17. Ring : walk and trot on hardground | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 18. Flexion tests forelimbs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Left <i>negative</i> | Right <i>negative</i> |
| 19. Flexion tests hindlimbs | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Left <i>negative</i> | Right <i>negative</i> |
| 20. Soft ground : walk, trot and gallop | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | |
| 21. Without shoe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | |



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| Other exams (Normal: N, Suspect : S, Abnormal: A, Unrealized : NR) | | | | | |
|---|-------------------------------------|--------------------------|--------------------------|-------------------------------------|------------------------------|
| | N | S | A | NR | Observation |
| 22. Ophthalmoscopy | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | No sign of recurrent uveitis |
| 23. Rectal palpation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 24. Haematology / Biochemistry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 25. Blood exam | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 26. Treatment | | | | | nothing |
| 27. Drugs research | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |



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RISK APPRECIATION

Today, no major risk

Today, common risk

Today, major risk

The 22th of November 22 in Brunembert

Signature et cachet du vétérinaire