

B. Prepurchase examination record

Client

Veterinarian

Name _____
Street _____
Address _____
Phone _____
Fax _____
E-Mail _____

Name **Jan-Morten Kruck**
prakt. Tierarzt
Street **Uhlandstr. 29 48565 Steinfurt**
Address **Tel. 02551/9192310 Fax. 02551/9192311**
Mobil 0170/8140987
tapraxiskruck@gmx.de
Phone _____
Fax _____
E-Mail _____

Third person (Section 11 General Conditions)

Buyer Vendor

Name _____
Street _____
Address _____
Phone _____
Fax _____
E-Mail _____

Place and date of examination

Gorkau, 04.05.2012

People present

Lena Dieter

Was the horse tried out?

yes no Irregularities _____

FEI/Equine passport available not available Identification number: *5L1003201806091*

Transponder *7292100048215* not controlled not found

Food-producing animal Non-food-producing animal Appendix does not exist Appendix not filled out

Identification

conforms with FEI/Equine passport

Name: *Nalia* Breed: *KWPN*

Sex: *gelding* Colour: *chestnut*

Age (Teeth): *4 years* Brand: _____

Markings: _____

I. General examination

Body condition normal _____

Coat and skin normal _____

Conspicuous scars no yes _____

Skin tumours no yes _____

Contract No.

122801

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Rectal temperature °C _____
 Pulse quality normal _____
 Rate at rest /min. _____
 Respiration normal difficulties on inspiration _____
 Pulse at rest /min. _____
 difficulties on expiration _____

Visual examination of head normal _____
 Conjunctiva normal _____
 Mandibular lymph nodes normal _____
 Jugular veins normal _____
 Nasal discharge no yes _____
 Spontaneous cough no yes _____

II. Examination at rest

Nervous system normal _____
 Any indications of paralysis and problems of the central nervous system _____

Eyes
 Anterior segment including lids, conjunctiva, cornea, anterior chamber, iris and adnexa normal _____
 Posterior segment including lens, vitreous humour and retina normal _____
 Mydriasis yes no (Please observe status of food)

Behaviour normal _____

Respiratory system
 Cough reflex normal _____
 Auscultation of the trachea normal _____
 Auscultation of the lungs normal _____

Following respiratory stimulation normal _____
 (rebreathing exam, closure of nostrils or via medication) *after work*

Heart normal _____

Oral cavity, teeth normal _____
 (rostral aspect) _____

External genitalia normal _____
 Visual examination and palpation _____

Faeces consistency normal _____

Drug testing urine blood immediately examined not examined different handling

III. Examination of the locomotor system

Visual inspection and palpation of the neck, back, croup, chest and abdominal region

normal

Visual inspection and palpation of the limbs

L. F.: - claw foot

R. F.: _____

L. H.: } No special findings

R. H.: _____

Shoeing normal _____

Examination of the horse at walk and trot in hand – straight up and back – on firm ground

normal

Flexion tests

Pain on turning no yes

Flexion of limbs (standard, 1 min, +, ++, +++)

L. F.: neg. pos. _____ L. H.: neg. pos. _____

R. F.: neg. pos. _____ R. H.: neg. pos. _____

Pain while flexing/flexion mechanically impossible No

Hoof tester Negative

Neurologic abnormalities No special findings

Additional examination _____

IV. Examination during/following exercise (heart, respiratory system, locomotory system)

(Horse should be exercised until it shows rapid respiration) lunged without side-reins ridden running free

Locomotory problems no yes _____

Abnormal respiratory sounds no on inspiration on expiration

Breathing problems no yes _____

Coughing, nasal discharge no yes _____

Auscultation Heart normal _____

Lungs normal _____

Pulse and respiratory rates following exercise

	Rate at rest	Immed. follow. exercise	After <u>1</u> minutes	After <u>10</u> minutes
Pulse	<u>76</u>	<u>72</u>	<u>40</u>	<u>36</u>
Respiration	<u>12</u>	<u>26</u>	<u>16</u>	<u>12</u>

Rapid respiration after 25 minutes at the trot and/or / minutes at the gallop

V. Other and/or special examinations

a) Radiographic examinations

Findings described (according to "Röntgenleitfaden", i.e. German Guidelines for reporting radiographic purchase examination)

yes no

Radiographs from: 20.09.2020

1.) Standard

Toe
(Dorsoproximal-
palmarodistal,
Oxspring)

L. F.:

- variculas : some small Cavities separate

R. F.:

- variculas : some small Cavities separate

Toe
(90°, Overview)

L. F.:

- club foot, irregular dorsal contour of coffin bone.

R. F.:

- no significant abnormalities,

L. H.:

- No significant abnormalities

R. H.:

- No significant abnormalities

Tarsus
(2 views: 45-70°,
90-135°)

L.:
(45-70°)

} No significant abnormalities.

L.:
(90-135°)

R.:
(45-70°)

} No significant abnormalities.

R.:
(90-135°)

Tarsus
(3rd view, 0°
recommended)

L.:

} No significant abnormalities

R.:

2.) Additional radiographic examination

Stifle
(2 views:
90–115°, 0/180°)

L.:
(90–115°)

L.:
(0/180°)

R.:
(90–115°)

R.:
(0/180°)

} No significant abnormalities.

} No significant abnormalities.

Spinal processes:
(thoracic/lumbar
90°, respectively, 270°)

No significant abnormalities.

number of radiographs:

20

3.) Additional radiographs (special supplementary radiographs for purpose of control)

Navicular bone L. F. (90°):
(90° and tang.)

L. F. (tang.):

R. F. (90°):

R. F. (tang.):

Pedal joint
(flexed, 45° and
315° on Oxspring
block)

L. F. (45°):

L. F. (315°):

R. F. (45°):

R. F. (315°):

Fetlock joint
(4 views, 0°, 45°,
90°, 315°)

L. F. (0°):

L. F. (45°):

L. F. (90°):

L. F. (315°):

R. F. (0°):

R. F. (45°):

R. F. (90°):

R. F. (315°):

4.) Other radiographs

C. Summary report



Following the prepurchase examination performed today, no evidence could be found of health problems that could influence the state of health.

Examination requirements



suitable



not suitable

Reasons:

Gonasi, 04.07.2022

(Place, date)

(Client or legal representative)

J. K. K.

(Veterinarian)

Additional/further examinations (e.g. rectal, vaginal, laboratory, complete examination of the oral cavity, haematology, blood chemistry, analysis for infectious diseases e.g. EIA, EHV, CEM)

normal

normal
