

Mark Deuss  
 Veterinary Surgeon

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

## Examination Report

"PIKATCKU UD WATERMOLEN"  
 (JE SUIS FERRUS TAME)

### Examination for the purpose of purchase, sale insurance

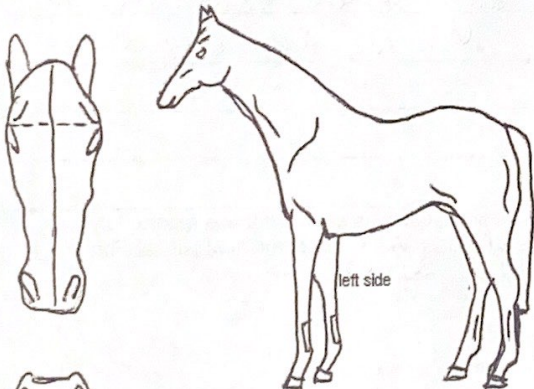
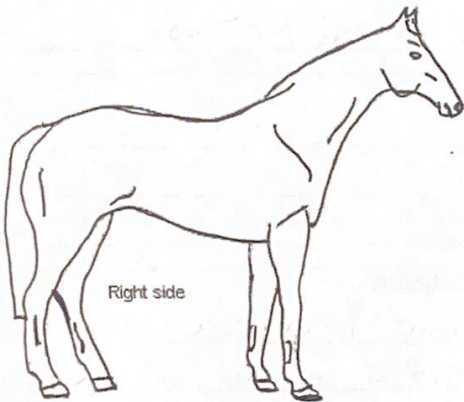
Company: \_\_\_\_\_  
 Horse/Pony is used for: SPORTS  
 Client: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Postal code and town: \_\_\_\_\_  
 Buyer Seller Owner: \_\_\_\_\_  
 Present Yes/No \_\_\_\_\_

### Description

Race or Type: KWPN  
 Pedigree no.: 528003 2020 08431  
 Age: 201 MAGI 2020  
 Sex: GELDING  
 Shoulder height: \_\_\_\_\_  
 Level of training: SPORTS  
 Colour: D. CHESTNUT  
 Outline: \_\_\_\_\_

gr. STUDBOOKPAPERS!

microchipnr.: 5282000 6298313



Hind rear view

fore rear view



Left

Right



Left

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 checked="" 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	<u>equal</u>	<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"/>

Walking on hard ground not deviant deviant

straight line    
 Left small volt    
 Right small volt

Trotting on hard ground

straight line    
 left small volt    
 right small volt

Trotting on soft ground

left volt    
 right volt

Cantering/Galloping on soft ground

left volt    
 right volt

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 -1  +/-  ++  
 RF -1  +/-  ++  
 LH -1  +/-  ++  
 RH -1  +/-  ++  
 L -1  +/-  ++  
 R -1  +/-  ++

Hock:

Fixing the kneecap

L not possible / possible  
 R not possible / possible

if necessary conductivity anaesthesia in consultation with the owner:

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"/>

Necessary results of any other x-ray examinations

Number: "PIKATCKU UD WATERMOLEN"

After the examination blood/no blood was taken to search for illegal practices.  
 If necessary laboratory results:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

IN CONSIGNATION

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FINAL CONCLUSION

CLINICAL IN GENERAL A  
 POSITIVE ADVICE ON THE  
 DAY OF THE EXAMINATION  
 IE 22/ OCT/22

The examination was carried out and reported by Mark Deuss, Veterinary surgeon at Kinrooi on: (date) 22/ OCT/22

(Signature and stamp)

Mark Deuss  
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 8640 Kinrooi (B)  
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