

Mark Deuss
Veterinary Surgeon

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Examination Report

"CASANOVA H"

(VANGELIS-S)

Examination for the purpose of purchase, sale insurance
Company: _____
Horse/Pony is used for: SPORTS
Client: _____
Address: _____
Postal code ad town: _____
Buyer Seller Owner: _____
Present Yes/No: _____

Description

Race or Type: AES
Pedigree no.: 826 0219088 692
Age: 10/10/2019
Sex: STALLION
Shoulder height: —
Level of training: SPORTS
Colour: BAY
Outline:

gfe studbook papers?

microchipnr.: 528200201201538

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 cornage operation: present/not present: _____

Further clinical examination

	not deviant	deviant
Respiratory system	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Laringoscopy if necessary	<input type="checkbox"/>	<input checked="" 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

Withers	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Back

Groin	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Left forefoot

Right forefoot	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Left hind leg

Right hind leg	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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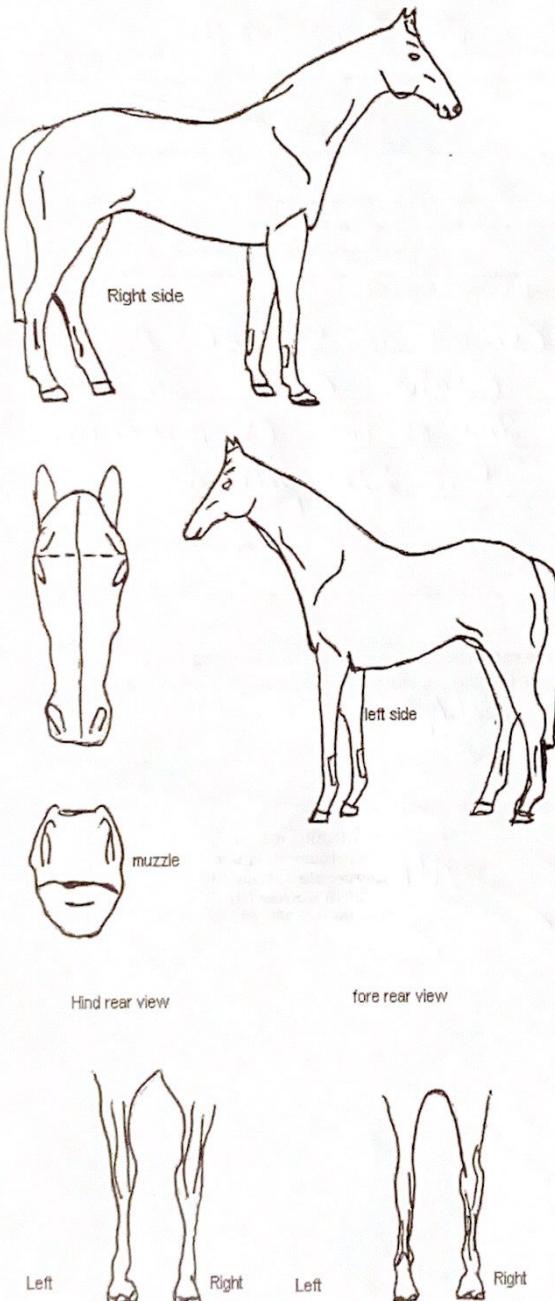
Fronts hoofs

Horn quality	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Hoof percussion

Hoof visitation	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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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/Galloping on soft ground		
left volt	<input checked="" type="checkbox"/>	<input type="checkbox"/>
right volt	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Bending tests		
Tightening of lower foot or leg		
Left forefoot	<input type="checkbox"/> not sensitive / sensitive	
Right forefoot	<input type="checkbox"/> not sensitive / sensitive	
Left hind leg	<input type="checkbox"/> not sensitive / sensitive	
Right hind leg	<input type="checkbox"/> not sensitive / sensitive	
Trotting off after two minutes bending		
LF (-)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
RF (-)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
LH (-)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
RH (-)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
L (-)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
R (-)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Hock:		
Fixing the kneecap		
L	<input type="checkbox"/> not possible / possible	
R	<input type="checkbox"/> not possible / possible	

If necessary conductivity anaesthesia in consultation with the owner:

Results of the X-ray examination

	good	fair	bad
Navicular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Navicular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fetlock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fetlock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fetlock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fetlock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stifle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stifle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Necessary results of any other x-ray examinations

Number: CASANOVA H

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
i.e 08/04/08

The examination was carried out and reported by
 Mark Deuss, Veterinary surgeon at Kinrooi on:
 (date) 08/04/2008

(Signature and stamp)

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