

Tierärztliche Praxis für Pferde

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FACHTIERÄRZTIN FÜR PFERDE

KAUFUNTERSUCHUNGEN, ORTHOPÄDIE, KARDIOLOGIE

Protocol for the purchase examination of a horse (page 1 of 2)

Description of the horse: Name / Pedigree: by Djabadu L - Quing
Registration number: DE 441410918016 Date of birth: 26.4.16 Sex: gelding
Chip number: 27602 0000465677 Colour: dark bay
Bodily condition: ☒ w.s.f. ☐
Nutritional condition: ☒ w.s.f. ☐
Coat and skin: ☒ w.s.f. ☐
Mucosal membranes: ☒ w.s.f. ☐
Mandibular lymph nodes: ☒ w.s.f. ☐
Jugular veins: ☒ w.s.f. ☐
Head: ☒ w.s.f. ☐
Mouth, teeth (inspection): ☒ w.s.f. ☐
External genitalia: ☒ w.s.f. ☐
Faeces: ☒ w.s.f. ☐
Striking scars: ☒ no ☐
Pulse: ☒ w.s.f. ☐
Heart auscultation: ☒ w.s.f. ☐
Breathing: ☒ w.s.f. ☐
Nasal discharge: ☒ no ☐
Coughing: ☒ no ☐ spontaneous ☐ coughing reflex
Trachea- lung auscultation: ☒ w.s.f. ☐
Respiratory sounds: ☒ no ☐ on inspiration ☐ on expiration
Heart- and breathing rate

	Before workload	After workload	Recovery time in min.
Heart rate	<u>40</u>	<u>72</u>	<u>10</u>
Breathing rate	<u>10</u>	<u>28</u>	<u>10</u>

Protocol for the purchase examination of a horse (page 2 of 2): horse: by Dabad

Eyes (Signs of disorders of the conjunctiva, cornea, iris, lenses, vitreous humour, background of the eye):

☒ no ☐ _____

Locomotor system

Shoeing: ☐ no ☒ front _____ ☐ hind _____

Inspection and palpation of the limbs: FL hoof flatter than FR

Front right: w.s.f.

Front left: w.s.f.

Hind right: capped hock

Hind left: capped hock

Back palpation: ☒ w.s.f. ☐ _____

Croup / tail: ☒ w.s.f. ☐ _____

Examination of walk and trot in hand straight forward: ☒ w.s.f. ☐ _____

Examination of walk and trot in a circle on hard ground: ☐ w.s.f. ☐ right circle RF+

Backwards: ☒ w.s.f. ☐ left circle LFr

Turning left and right: ☒ w.s.f. ☐ _____

Flexion test:

Front right: ☒ neg. ☐ _____

Front left: ☒ neg. ☐ _____

Hind right: ☒ neg. ☐ _____

Hind left: ☐ neg. ☐ _____

Examination under workload: lunged: ☒ without side reins ☐ with side reins, ☐ free, ☐ ridden

Lameness / locomotory disturbances: ☒ no ☐ _____

Breathing problems: ☒ no ☐ _____

Coughing / nasal discharge: ☒ no ☐ _____

Heart- / Lung auscultation: ☒ no ☐ _____

Doping sample:

yes ☒ no ☐; urine ☒ blood ☒; shipping ☐ yes ☒ no; stored for 6 months ☒ yes ☐ no

Radiological examination: ☒ yes (see attached protocol) ☐ no; Endoscopy: ☐ yes (see attached protocol) ☒ no

Place, Rotterdam Date, 21.5.20

 veterinarian stamp