

Mark Deuss
 Veterinary Surgeon

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Examination Report

"EL PATRON Z"
 (EL BARONE)

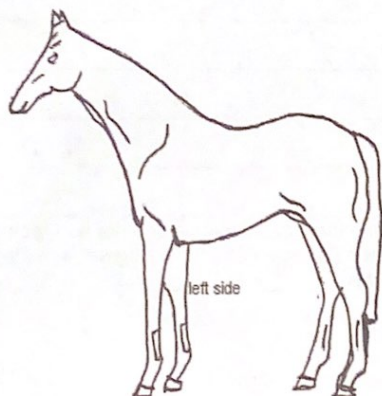
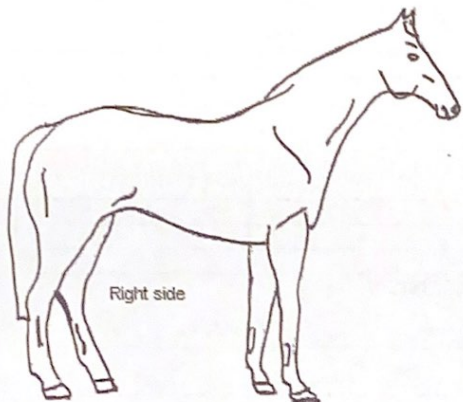
Examination for the purpose of purchase, sale insurance

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

Description

Race or Type: Z
 Pedigree no.: 056015 Z 55161120
 Age: 17 June 2020
 Sex: GELDING
 Shoulder height: _____
 Level of training: bag sports
 Colour: bag
 Outline: _____

JA. STUBBOEKPAPERS!
MICROCHIPNR.: 58221000 630 4861



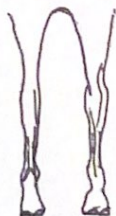
Hind rear view

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: _____
 Respiration in condition of rest/possibly after labour: _____
 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 type="checkbox"/>	<input type="checkbox"/>
Laryngoscopy if necessary	<input type="checkbox"/>	<input type="checkbox"/>
Circulation system	<input type="checkbox"/>	<input type="checkbox"/>
Digestion system	<input type="checkbox"/>	<input type="checkbox"/>
Urogenital system	<input type="checkbox"/>	<input type="checkbox"/>
Nervous system	<input type="checkbox"/>	<input type="checkbox"/>
Motion system:		
Inspection	<input type="checkbox"/>	<input type="checkbox"/>
Palpation	<input type="checkbox"/>	<input type="checkbox"/>
Percussion	<input type="checkbox"/>	<input type="checkbox"/>
Neck	<input type="checkbox"/>	<input type="checkbox"/>
Withers	<input type="checkbox"/>	<input type="checkbox"/>
Back	<input type="checkbox"/>	<input type="checkbox"/>
Groin	<input type="checkbox"/>	<input type="checkbox"/>
Left forefoot	<input type="checkbox"/>	<input type="checkbox"/>
Right forefoot	<input type="checkbox"/>	<input type="checkbox"/>
Left hind leg	<input type="checkbox"/>	<input type="checkbox"/>
Right hind leg	<input type="checkbox"/>	<input type="checkbox"/>
Fronts hoofs	equal not equal	
Horn quality	<input type="checkbox"/>	<input type="checkbox"/>
Hoof percussion	<input type="checkbox"/>	<input type="checkbox"/>
Hoof visitation	<input type="checkbox"/>	<input type="checkbox"/>

	not deviant	deviant
Walking on hard ground		
straight line	<input type="checkbox"/>	<input type="checkbox"/>
Left small volt	<input type="checkbox"/>	<input type="checkbox"/>
Right small volt	<input type="checkbox"/>	<input type="checkbox"/>
Trotting on hard ground		
straight line	<input type="checkbox"/>	<input type="checkbox"/>
left small volt	<input type="checkbox"/>	<input type="checkbox"/>
right small volt	<input type="checkbox"/>	<input type="checkbox"/>
Trotting on soft ground		
left volt	<input type="checkbox"/>	<input type="checkbox"/>
right volt	<input type="checkbox"/>	<input type="checkbox"/>
Cantering/Galloping on soft ground		
left volt	<input type="checkbox"/>	<input type="checkbox"/>
right volt	<input type="checkbox"/>	<input type="checkbox"/>
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 -/ ±/ +/ ++	
	RF -/ ±/ +/ ++	
	LH -/ ±/ +/ ++	
	RH -/ ±/ +/ ++	
Hock:	L -/ ±/ +/ ++	
	R -/ ±/ +/ ++	
Fixing the kneecap		
L	not possible / possible	
R	not possible / possible	

Number: "EL PATRON 2"

After the examination ~~blood~~ blood was taken to search for illegal practices.
If necessary laboratory results:

FINAL CONCLUSION

RADIOLOGICAL: 1 FRAGMENT

FET LOCK LH (= FRONT SIDE)

ACCEPTABLE FOR SPORTS.

ON THE DAY OF THE EXAMINATION

IE 2022/MAY/02

if necessary conductivity anaesthesia in consultation with the owner:

The examination was carried out and reported by Mark Deuss, Veterinary surgeon at Kinrooi on: (date) 02/MAY/2022

Results of the X-ray examination

DD 02/MAY/2022

	good	fair	bad
Navicular LF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 2
Navicular RF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Fetlock LF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Fetlock RF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Fetlock LH till	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 2+
Fetlock RH	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Hock L	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Hock R	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Stifle L	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2
Stifle R	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1-2

(Signature and stamp)

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Necessary results of any other x-ray examinations

FET LOCK LH: 1 FRAGMENT DORSAL

X-RAYS BACU: NO SIGNIFICANT ABNORMALITIES