

## Examination report

(Formulated by the Netherlands Equine Veterinary Association of the Royal Netherlands Veterinary Association.  
The pre-purchase examination was performed using the handbook "De veterinaire keuring van het paard" issue 2007 as a guidance)

Number: E 94734

Client: \_\_\_\_\_  
Address: \_\_\_\_\_  
Zip code / City: \_\_\_\_\_  
Client is present at the exam: yes / no  
Client is: buyer / seller / other, namely \_\_\_\_\_  
Level of training (according to client): \_\_\_\_\_  
Proposed use (according to client): breeding / sport  
Location where the exam takes place: clinic / other, namely \_\_\_\_\_

Signalment  
Name: Gattaca 2  
Breed or type: \_\_\_\_\_  
Studbook no: \_\_\_\_\_  
Microchip number: 981100004077954  
Pedigree: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_  
Coat colour: \_\_\_\_\_ Height at withers ±: \_\_\_\_\_

### Markings

Head: \_\_\_\_\_  
LF: \_\_\_\_\_ LH: \_\_\_\_\_  
RF: \_\_\_\_\_ RH: \_\_\_\_\_  
Other: \_\_\_\_\_

Right side



Front limbs  
Rear view

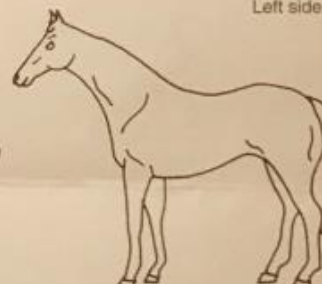


Muzzle

Hindlimbs  
Rear view



Left side



Evidence seen of possible behavioural vices? yes / no (If yes: detail: \_\_\_\_\_)

Blood collected and put into custody by the examining veterinary surgeon? yes / no

Blood sample tested for prohibited substances at client's request? yes / no

Veterinary practice (stamp):

**Paardenpraktijk de Eemsmoer**  
J. Stevens  
Bierenhuis voor paarden  
06-14/0176

### CONCLUSION:

Positive advice

Thus examined and reported by me:

J. Stevens

veterinary surgeon in:

Delhiyl

This report can relate only to the appearance on the date of  
examination: 30.10.17

Signature of examining veterinary surgeon:

Signature of Client:

1. The examining veterinary surgeon and/or veterinary practice shall not be held liable for loss or damage caused as a result of the performance of the examination or as a result of inaccuracies or shortcomings in their preparation of this report, unless it has been established that this loss or damage is due to negligence on the part of the examining veterinary surgeon.  
2. The client shall have the sole right to make any action due to liability on the part of the examining veterinary surgeon and/or veterinary practice as mentioned under 1 above. Parties other than the client shall not be entitled to derive any rights to compensation for damages arising from this examination report.  
3. Liability shall be limited at all times to that amount covered by the veterinary surgeon's professional indemnity insurance applicable at the time of the examination. Details of this coverage in the form of policy documents for this insurance may be inspected at the veterinary practice premises, and copies of these may be obtained at first request from the veterinary practice at no charge.  
4. The provisions agreed on this examination report shall also apply in the event the client fails to sign this form, or refuse to accept receipt of this examination report.  
5. If the client upon whose instructions the examination was performed is not the owner of the horse, the client is wholly responsible for having obtained the owner's consent to all procedures performed during the examination, and the client shall fully indemnify the veterinary surgeon in respect of any claim for the owner arising from an allegation that such consent was not given.  
6. In the event the client and/or third parties are of the opinion that the health of the horse at the time of the present examination does not correspond to that which is stated in the examination report, these parties must report this to the other party without delay and in writing (for example, together with the purchase contract), under penalty of the signing of every right of action against the examining veterinarian and/or the veterinary practice, and to hold this party liable for compensation, while also simultaneously providing a copy of this report to the examination veterinarian and the veterinary practice.  
7. The laws of the Netherlands shall apply exclusively to any disputes arising from the performance of the examination and/or the completion of the examination report, and the Court of the Netherlands shall retain sole jurisdiction to hear these disputes.  
8. In the event of differing interpretations between the Dutch and English text of these conditions, the content of the Dutch text shall be decisive.

## General and clinical examination

	normal	abnormal
conformation and stance	<input type="checkbox"/>	<input type="checkbox"/>
condition	<input type="checkbox"/>	<input type="checkbox"/>
skin and coat	<input type="checkbox"/>	<input type="checkbox"/>
mucous membranes	<input type="checkbox"/>	<input type="checkbox"/>
lymph nodes	<input type="checkbox"/>	<input type="checkbox"/>
eyes and eyelids	<input type="checkbox"/>	<input type="checkbox"/>
<b>Respiratory system</b>		
respiration at rest	<input type="checkbox"/>	<input type="checkbox"/>
type of respiration	<input type="checkbox"/>	<input type="checkbox"/>
spontaneous coughing	no	yes
larynx sensitivity	<input type="checkbox"/>	<input type="checkbox"/>
respiration after exercise	<input type="checkbox"/>	<input type="checkbox"/>
abnormal sounds	no	yes
laryngoscopy performed	no	yes
laryngoscopy findings	<input type="checkbox"/>	<input type="checkbox"/>
<b>Circulatory system</b>		
peripheral circulation	<input type="checkbox"/>	<input type="checkbox"/>
heart at rest	<input type="checkbox"/>	<input type="checkbox"/>
heart after exercise	<input type="checkbox"/>	<input type="checkbox"/>
<b>Digest. system</b> (ext. insp.)	<input type="checkbox"/>	<input type="checkbox"/>
mouth, teeth, tongue	<input type="checkbox"/>	<input type="checkbox"/>
<b>Urogen. system</b> (ext. insp.)	<input type="checkbox"/>	<input type="checkbox"/>
<b>Nervous system</b>		
tail tone	<input type="checkbox"/>	<input type="checkbox"/>
correction reflexes	<input type="checkbox"/>	<input type="checkbox"/>
coordination	<input type="checkbox"/>	<input type="checkbox"/>

## Inspection, palpation and eventual percussion

	normal	abnormal
head	<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"/>
croup	<input type="checkbox"/>	<input type="checkbox"/>
left frontlimb	<input type="checkbox"/>	<input type="checkbox"/>
right frontlimb	<input type="checkbox"/>	<input type="checkbox"/>
left hindlimb	<input type="checkbox"/>	<input type="checkbox"/>
right hindlimb	<input type="checkbox"/>	<input type="checkbox"/>
<b>Hooves</b>		
horn quality	<input type="checkbox"/>	<input type="checkbox"/>
hoof percussion	<input type="checkbox"/>	<input type="checkbox"/>
hoof shape	even / uneven	higher than
shoeing	no / front / front and hind	
type of shoeing		

## Walk, trot and canter

	normal	abnormal
<b>Walking on hard surface</b>		
straight line	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the left	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the right	<input type="checkbox"/>	<input type="checkbox"/>
<b>Trotting on hard surface</b>		
straight line	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the left	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the right	<input type="checkbox"/>	<input type="checkbox"/>
<b>Trotting on soft surface</b>		
small circle on the left	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the right	<input type="checkbox"/>	<input type="checkbox"/>
<b>Cantering on soft surface</b>		
small circle on the left	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the right	<input type="checkbox"/>	<input type="checkbox"/>

## Flexion tests:

## Forced flexion:

LF not sensitive / sensitive  
 RF not sensitive / sensitive  
 LH not sensitive / sensitive  
 RH not sensitive / sensitive

## Trotting after 1 min. flexion:

LF - ± + ++  
 RF - ± + ++  
 LH - ± + ++  
 RH - ± + ++

Radiological examination performed: ☒ yes ☐ no

Number of X rays: 20

## Assessment of radiographs:

## Grading

Navicular bone	LF	1-2	RF	2
Fetlock joint	LF	1	RF	1
Sesamoid bones	LF	1-2	RF	2
Tarsal joint	LH	1-2	RH	1-2

	Fragments	Remarks
	- +	
Fetlock joint	LF <input checked="" type="checkbox"/> <input type="checkbox"/>	
Fetlock joint	RF <input checked="" type="checkbox"/> <input type="checkbox"/>	
Stifle joint	LH <input checked="" type="checkbox"/> <input type="checkbox"/>	
Stifle joint	RH <input checked="" type="checkbox"/> <input type="checkbox"/>	
Tarsal joint	LH <input checked="" type="checkbox"/> <input type="checkbox"/>	
Tarsal joint	RH <input checked="" type="checkbox"/> <input type="checkbox"/>	
Fetlock joint	LH <input checked="" type="checkbox"/> <input type="checkbox"/>	
Fetlock joint	RH <input checked="" type="checkbox"/> <input type="checkbox"/>	

## Radiological exam of other parts / extra findings:

## Other remarks: