

# 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: E123012

## Signalment

Name: Ric Dorado  
Breed or type: KWPN  
Studbook no: 528003202006556  
Microchip number: 528210004994079  
Pedigree: Le Formidable x Lord Leatherhead  
Age: 2y. Sex: Horse  
Coat colour: Chestnut Height at withers ±: \_\_\_\_\_

Level of training (according to client): \_\_\_\_\_

Proposed use (according to client): breeding / sport

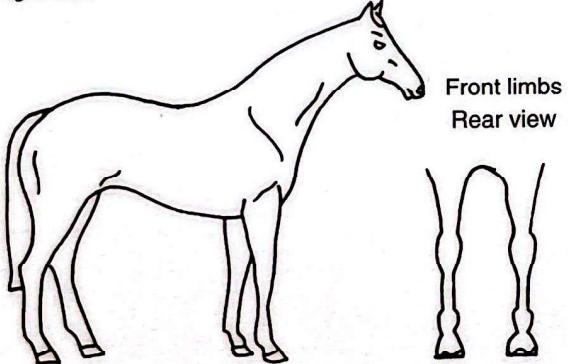
Location where the exam takes place: clinic / other, namely Zevenet

## Markings

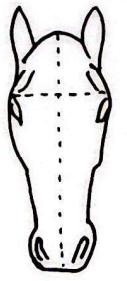
Acc. paesport

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

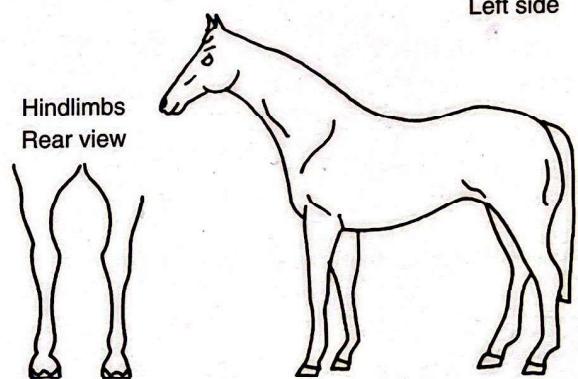
Right side



Front limbs  
Rear view



Left side



Hindlimbs  
Rear view

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 Oost Nederland**  
**Drs. B. van Vlierbergen**  
**Wagenvoortsdijk 11**  
**7218 MP Almen**  
**0575-432300**

## CONCLUSION:

Acceptable.

Thus examined and reported by me:

Drs. B. Van Vlierbergen

veterinary surgeon in:

Almen

This report can relate only to the appearance on the date of examination: 3 Aug. 2022

Signature of examining veterinary surgeon:

Signature of Client:

# Examination report

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## General and clinical examination

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

## Inspection, palpation and eventual percussion

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

## Walk, trot and canter

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

## Assessment of radiographs:

### Grading

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

	Fragments	Remarks
-	-	+
Fetlock joint	LF	☒ □
Fetlock joint	RF	☒ □
Stifle joint	LH	☒ □
Stifle joint	RH	☒ □
Tarsal joint	LH	☒ □
Tarsal joint	RH	☒
Fetlock joint	LH	☒ □
Fetlock joint	RH	☒ □

## Radiological exam of other parts / extra findings:

- Tarsal joint LH: small fragment at base Talus bone. Advise to leave it.
- Neck: No remarks
- Back: gr. 3

## Other remarks: