

VETERINARIAN FORM

The undersigned veterinary, Ine Havermans, declares that the foal described below has been examined and that this form has been completed to the best of his/her knowledge.

Name foal: Wasabi van het Gersthof Z **Chip nr:** 981100004941194
Gender: colt filly **Date of birth:** 23/04/2022
Color: chestnut **Pedigree:** Piece of Cake x Coreano Z

1. How are:

State of nutrition good normal inadequate
General Appearance good normal inadequate
Coat conditions good normal inadequate
Comments _____

2. Are there any defects in:

Eyes no yes defects
Teeth no yes defects overbite no yes
Nose no yes defects
Discharge from the nose no yes defects
Comments _____

3. Is the respiration normal?

yes no

If not, what is the defect? _____

Have you observed any spontaneous coughing?

no yes

Comments _____

4. Are there any symptoms which indicate a poor or abnormal digestion?

no yes

Comments _____

5. What is the state of the heartbeat and pulse at rest and after trot?

normal aberrant

Are there any heart murmurs?

no yes

6. Are there any defects concerning the limbs and hooves such as defective hoof shape, thickening of tendons or bones or enlargement of any joints?

no yes, see comments

Are there any limb deformities?

no yes, see comments

Comments _____

7. Are there any defects of the external genitalia? If so, what are they?

no yes

If stallion: testicles descended yes, both only left only right no, not descended

Comments _____

8. Is there any sign of an umbilical or an inguinal hernia?

no yes

Comments _____

9. Does the foal show defects in walk and/or trot? If yes, what are the defects?

no yes

Comments _____

10. Are there any other symptoms of sick ness, defects or faults that must be indicated for sales?

If so, which ones?

yes no

Comments _____

Date: 30/08/2022

Name: Ine Havermans

Place: Grobbendonk

Signature and stamp:

Ine Havermans
Dierenarts
Klein Rossem 2
2200 Noorderwijk

