

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 144271

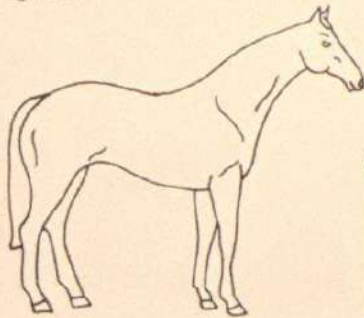
Client: _____
Address: _____
Zip code / City: _____
Client is present at the exam yes / no
Client is: buyer / seller / other, namely _____
Level of training (according to client): _____
Proposed use (according to client): breeding / sport
Location where the exam takes place: clinic / other, namely _____

Signalment
Name: Texas
Breed or type: KWPN
Studbook no: 528 00 3202 300 575
Microchip number: 528 01 0008 027 226
Pedigree: Dolan vlx Colani
Age: 3 Sex: hengst
Coat colour: Grey Height at withers ±: 1.68

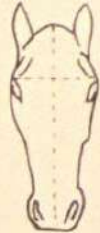
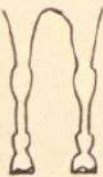
Markings

Head: _____
LF: _____ LH: _____
RF: _____ RH: _____
Other: _____

Right side

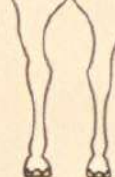


Front limbs
Rear view

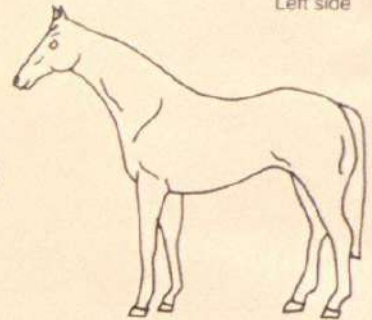


Muzzle

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 Eemmond
Dierenarts Joeri Stevens
Deltzijl
06 41470176

CONCLUSION

Positieve reden

Thus examined and reported by me:

veterinary surgeon in:

This report can relate only to the appearance on the date of

examination: 19/1/26

Signature of Client:

Signature of examining veterinary surgeon:

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 malice or negligence on the part of the examining veterinary surgeon.
2. The client shall have the sole right to invoke any action due to liability on the part of the examining veterinary surgeon and/or veterinary practice as described 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 the 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 printed 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 by the owner arising from an allegation that such consent was not given.
6. In the event the client and/or third parties act 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 lapsing of every right of action against the examining veterinarian and/or the veterinary practice, and to hold the party liable for compensation, while also simultaneously providing a copy of this report to the examination veterinarian and the veterinarian generalist.
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.

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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"/>
Respiratory system		
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"/>
Circulatory system		
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"/>
Digest. system (ext. insp.)	<input type="checkbox"/>	<input type="checkbox"/>
mouth, teeth, tongue	<input type="checkbox"/>	<input type="checkbox"/>
Urogen. system (ext. insp.)	<input type="checkbox"/>	<input type="checkbox"/>
Nervous system		
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"/>
Hooves		
horn quality	<input type="checkbox"/>	<input type="checkbox"/>
hoof percussion	<input type="checkbox"/>	<input type="checkbox"/>
hoof shape	even	uneven
shoeing	no	front / front and hind
type of shoeing		

Walk, trot and canter

	normal	abnormal
Walking on hard surface		
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"/>
Trotting on hard surface		
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"/>
Trotting on soft surface		
small circle on the left	<input type="checkbox"/>	<input type="checkbox"/>
small circle on the right	<input type="checkbox"/>	<input type="checkbox"/>
Cantering on soft surface		
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:	Trotting after 1 min. flexion:
LF not sensitive / sensitive	LF - ± + ++
RF not sensitive / sensitive	RF - ± + ++
LH not sensitive / sensitive	LH - ± + ++
RH not sensitive / sensitive	RH - ± + ++

Radiofölogical examination performed: yes no
 Number of X rays: 35

Assessment of radiographs:

	Grading	
Navicular bone	LF 1-2	RF 1-2
Fetlock joint	LF 1	RF 1
Sesamoid bones	LF 1-2	RF 1-2
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:

Back & Neck to issue

Other remarks: