

Clinical Examination Report Auction Foal



Name Foal: DORADO V. VIBETHEN 12

Date of birth: 16/04/2005

Chipnumber: 981100006133277

Sex: ☒ colt ☐ filly

Sire: 05 601525536365

Dam's Sire: _____

Color: Brown

1. General condition

State of nutrition
General appearance
Coat condition
Remarks

☒ Good ☐ Normal ☐ Inadequate
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2. Are there any defects in

Eyes ☒ No ☐ Yes
Teeth ☒ No ☐ Yes
Overbite ☐ No ☒ Yes (upper and lower teeth DON'T touch)
Nose ☒ No ☐ Yes
Discharge from the nose ☒ No ☐ Yes
Remarks

3. Is the respiration normal?

☐ No ☒ Yes

If not, describe? _____

Have you observed any spontaneous coughing? ☒ No ☐ Yes

Remarks _____

4. Are there any symptoms which may indicate a poor or abnormal digestion? ☒ No ☐ Yes

Remarks _____

5. Is the heartbeat at rest normal? ☐ No ☒ Yes

Are there any heart murmurs? ☒ No ☐ Yes

6. Are there any abnormalities such as abnormal hoof shape, soft or hard tissue swelling or joint effusions? ☒ No ☐ Yes

Are there any limb deformations? ☒ No ☐ Yes

Remarks _____

7. Are there any defects of the external genitalia? If so, what are they? ☒ No ☐ Yes

If stallion: Testicles palpable? ☐ No ☒ Yes ☐ Only left ☐ Only right

Remarks _____

8. Is there any sign of an umbilical or an inguinal hernia? ☒ No ☐ Yes

Remarks _____

9. Does the foal show gait abnormalities? ☒ No ☐ Yes

If yes what are the abnormalities? _____

10. Are there any other significant clinical signs present that must be indicated to your opinion?

☒ No ☐ Yes: _____

Date of the examination

01/05/2005

Name of veterinarian

DR. HANS SCHOTTE

Signature, Stamp of veterinarian

