Clinical Examination Report Auction Foal	
Name Foot Diable 10	n + wer 'Date of birth: 215 2024
Name Foal: 19811 0000	Date of birth.
Sire: DI ARADO	Dam's Sire: TExtullar Want Lan.
<u> </u>	Color: Guert Bruin
1. General condition	
State of nutrition General appearance Coat condition Remarks	☐ Good ☐ Normal ☐ Inadequate ☐ Good ☐ Normal ☐ Inadequate ☐ Good ☐ Normal ☐ Inadequate ☐ Inadequate
2. Are there any abnormalities in:	
Eyes Teeth Overbite Nose Discharge from the nose Remarks	☑ No ☐ Yes ☑ No ☐ Yes ☐ No ☐ Yes (upper and lower teeth DON'T touch) ☑ No ☐ Yes ☑ No ☐ Yes ☑ No ☐ Yes
3. Is the respiration normal? If not, describe?	□ No 🗗 Yes
Have you observed any spontane Remarks	ous coughing? Ճ No □ Yes
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 murmers? 🗷 No □ Yes	
6. Are there any anbormalities 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?	
Does the foal show gait abnormalities	es? ☑No ☐ Yes
If yes what are the abnormalities?	
Are there any other significant cl opinion?	inical signs present that must be indicated to your
⊠No □ Yes:	
Date of the examination Nan	ne of veterinarian Signature, stamp of veterinarian Dierenaris Björn Thyssen N3914
05.08.2024	Dierenans-Bjohr Hyssan Hovel DAP Aan De Watergang Spaanskwartler Bl.a 9170 De Klinge