



The undersigned, veterinarian at Linghoeve, declares to have examined the foal described below and has filled in this form to the best of his/her knowledge.

Foals name: _____
 gender: stallion mare date of birth: 12-04-24
 colour: zwart breeding: Lijento - Charmeur
 owner: van Erp
 address: _____

1. How are:
 Nutritional state: good normal poor
 General impression: good normal poor
 Skin: good normal poor
 Remarks: meerdere geïrriteerde zones op hoofd en in flanken

2. Are there any abnormalities on:
 eyes yes no
 teeth yes no overbite mm
 nose yes no
 nasal discharge yes no
 remarks: _____

3. Breathing normally? yes no
 If not, what abnormalities are there? _____
 Any signs of spontaneous coughing? yes no
 Remarks: _____

4. are there any signs of pour or abnormal digestion?
 yes no
 Remarks: _____

5. How are heartrate and pulse in rest and after trot? normal abnormal
 Remarks: _____

6. What defects are there on legs and hooves, such as abnormal hoof shape, thickening of tendons or bones or overfilling of any joint?
 no defects defects
 Remarks: Trans voor, ietwat varus tarsus.

7. Any defects on outer genitalia?
 When stallion: 2 testicles yes no
 yes no
 Both testicles present: yes no
 Remarks: _____

8. Is the foal sound in walk and trot? If not, what deviations are there
 yes no
 Remarks: _____

9. Are there any other signs of illness, defects or deviations?
 yes no
 Remarks: _____

date: 26-06-24 town: Den Hout
 name: Sde Jager signature: Sde Jager