



## On behalf of: Owner

|         |                                 |
|---------|---------------------------------|
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## Main data

|   |                                |   |                     |
|---|--------------------------------|---|---------------------|
| Name <b>Don Sarko Zack</b>  | Race <b>DV</b>                 | Color <b>brun</b>                                     | Sex <b>Stallion</b> |
| Birthday <b>08-04-2023</b>  | Reg No. <b>208333DW2330704</b> | Chip <b>208213990537292</b><br>No.                    |                     |
| The identity and markings of the horse are in agreement with its passport: <input type="checkbox"/> |                                | Horse is chipped: <input checked="" type="checkbox"/> |                     |

The horse is being purchased for (usage): dressage, when the reaches a ridden age

For how long has the horse been continuously trained/ridden, previously to the pre-purchase exam?:

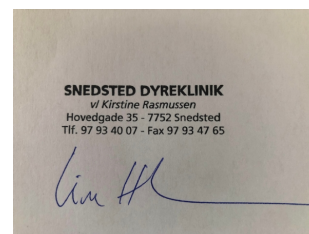
Seller is registered as a client with the practice of the veterinary surgeon performing the pre-purchase exam ? Yes

With reference to the conditions and limitations of the pre-purchase examination specified in the advance agreement, my conclusions as the examining veterinary surgeon on the day of the examination are as follows

- From a veterinary point of view, there is a standard risk that the health status of the horse as of this date will influence the proposed usage of the horse. Ref. Point
- From a veterinary point of view, there is a mildly increased risk that the health status of the horse as of this date will influence the proposed usage of the horse. Ref. Point
- From a veterinary point of view, there is a moderately increased risk that the health status of the horse as of this date will influence the proposed usage of the horse. Ref. Point
- From a veterinary point of view, there is a considerably increased risk that the health status of the horse as of this date will influence the proposed usage of the horse. Ref. Point
- Without further supplementary examinations, it remains im possible to draw any conclusions from the performed examination. Ref. Point

11-09-2023

Date



Signature

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## 1. General condition

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1a Body condition:

Average

1b Abnormal fat deposits on neck or trunk ?

No  Yes

1c Abnormalities in general condition ?

No  Yes

1d Other comments:

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## 2. Skin

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2a Abnormalities in presentation of skin or hair coat ?

No  Yes

2b Signs of hair loss as a result of pruritus or wear of skin, mane or tail ?

No  Yes

2c Signs of sarcoids or melanoma like lesions on the head, ventral abdomen, pectoral region, medial thigh, genitals or elsewhere ?

No  Yes

2d Signs of abnormalities in the saddle or girth region ?

No  Yes

2e Other comments:

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## 3. Head and teeth

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3a Abnormal smell or discharge from the mouth or nostrils ?

No  Yes

3b Abnormalities in the symmetry of the skull and/or mandible and/or masticatory muscles ?

No  Yes

3c Abnormalities during palpation of the temporo-mandibular joints ?

No  Yes

3d Abnormalities in the soft tissues of the mouth, including the lips ?

No  Yes

3e Are enamel points or hooks present ?

**teeth, other than incisives, not evaluated**

No  Yes

3f Are visible wolf teeth present ?

No  Yes

3g Visible abnormalities in the presentation of the canine teeth or incisors ?

No  Yes

3h Abnormalities in the mobility of the jaws or the occlusion of the teeth ?

No  Yes

3i Use of mouth speculum during the examination ?

No  Yes

3j Use of focal light during the examination?

No  Yes

3k Was the oral cavity flushed with water before the examination ?

No  Yes

3l Was a dental mirror used during the examination ?

No  Yes

3m Was the horse sedated during the examination ?

No  Yes

3n Other comments:

**teeth, other than incisives, not evaluated**

## 4. Eyes

4a Abnormalities of the menace or pupillary reflex ?

No  Yes

4b Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ?

No  Yes

4c Abnormalities of the conjunctiva or third eyelid, including discharge ?

No  Yes

4d Abnormal macroscopic findings of the cornea, iris or lens ?

No  Yes

4e Was examination of eyes performed in a darkened room ?

No  Yes

4f Use of focal light during the examination ?

No  Yes

4g Other comments:

## 5. Neck

5a Abnormalities during inspection and palpation of the crest of the neck and/or soft tissues of the neck ?

No  Yes

5b Abnormalities in the symmetry of neck musculature ?

No  Yes

5c Abnormalities during palpation or movement of the neck ?

No  Yes

5d Abnormalities in the symmetry of the shoulders and upper forearms ?

No  Yes

5e Other comments:

## 6. Back

6a Abnormalities in the curvature, symmetry and muscle mass of the back and hind quarters ?

No  Yes

6b Abnormalities during superficial or deep palpation of the back and hind quarters ?

No  Yes

6c Abnormalities in tail tone ?

No  Yes

6d Abnormal musculo-cutaneous reflex ?

No  Yes

6e Abnormalities in the mobilisation and moveability of the back and hind quarters at rest ?

No  Yes

6f Pain or resentment to palpation of the girth area ?

No  Yes

6g Other comments:

## 7. Genitals

7a Mares: Abnormalities in symmetry, conformation and closure of the vulva ?

No  Yes

7b Mares: Abnormalities in the shape, size, texture or symmetry of the udder ?

No  Yes

7c Stallions and geldings: Abnormalities during palpation of the prepuce ?

No  Yes

7d Stallions and geldings: Abnormalities during palpation of the scrotum ?

No  Yes

7e Stallions: Abnormalities of the placement, size or texture of the testicles ?

No  Yes

7f Other comments:

## 8. Heart

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8a At rest: Abnormalities in the peripheral circulation (mucous membranes, capillary refill time, jugular, vein, jugular pulsation) and/or ventral oedema ?

No  Yes

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8b Abnormalities during the auscultation of the cardiac Puncta maxima (heart sounds, murmurs, arrhythmias)?

No  Yes

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8c After exercise: Abnormalities in rhythm, murmurs and/or jugular pulsation after sufficient increase in pulse rate ?

No  Yes

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8d Other comments:

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## 9. Airways

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9a At rest: Abnormalities during palpation of the upper airway lymph nodes ?

No  Yes

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9b Abnormalities of the respiratory frequency or pattern ?

No  Yes

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9c Abnormalities during auscultation of the trachea or bilateral auscultation of the thorax ?

No  Yes

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9d Is nasal discharge noticed ?  
*If yes, what type of discharge ?*

No  Yes

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9e During exercise: Abnormal audible respiratory sounds ?

No  Yes

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9f Post exercise: Abnormalities related to the airways following exercise (respiratory rate, abnormal sounds or discharge) ?

No  Yes

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9g Any signs of coughing while examining the horse?

No  Yes

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9h Other comments:

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## 10. Limbs

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10a Abnormalities in limb angulation or toe-pastern axis ?

LF: No  Yes   
RF: No  Yes   
LH: No  Yes   
RH: No  Yes

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10b Abnormalities in hoof symmetry (size and shape: pairwise comparison) ?

BF: No  Yes

BB: No  Yes

10c1 Abnormalities in shoeing from a standard open shoe?

LF: No  Yes

RF: No  Yes

10c2 Abnormalities in shoeing from a standard open shoe?

LH: No  Yes

RH: No  Yes

10ca Is the horse without shoes (no shoes on all 4 hooves) ?

No  Yes

10cb Is the horse without shoes on the hind hooves ?

No  Yes

10d Abnormalities in the conformation/shape of the hoof (walls, heels, sole, flares, coronary band, horn quality or symmetry) ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

10e Abnormalities during palpation of the bones of the limbs ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

10f Abnormalities during palpation of the joints and tendon sheaths of the limbs ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

10g Abnormalities during palpation of the suspensory ligaments, tendons or other ligaments including tendons and ligaments in the fetlock/pastern region ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

10h Other comments:

## 11. Examination during exercise

11a At the walk on a firm surface: Abnormalities in limb angulation or toe-pastern axis ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

11b Abnormalities in the landing-, weightbearing- and/or protraction phases of the hoof in relation to the limb conformation ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

11c Abnormalities in movement during tight turns ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

11d At the trot on a firm surface: Any gait abnormalities / lameness ?

LF: No  Yes

RF: No  Yes

LH: No  Yes

RH: No  Yes

11e Flexion test has not been performed

**age of the horse**

11g Lunging on a firm surface on both left and right rein has not been performed

**age of the horse**

11i Lunging on soft surface on both left and right rein has not been performed

**age of the horse.**

**Seen loose in outdoor arena**

11l Any abnormalities of mobility noticed in relation to the neck, back or hindquarters of the horse during movement ?

No  Yes

11m Any signs of ataxia ?

BF: No  Yes

BB: No  Yes

11n Any abnormalities noted in the horse's reaction when doing rein-back (4-6 steps) ?

No  Yes

11o Other comments:

## 12. Behavior

12a Does the horse show signs of abnormal behavior during the clinical assessment ?

No  Yes

12b Other comments:

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### 13. Additional examinations or reports

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13a Has a radiographic examination taken place?

No  Yes

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13c Is ridden assesment performed?

No  Yes

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13g Extended examination deemed required for the following organ system

No  Yes

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13i Has a blood sample been obtained for medication control?

No  Yes

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13j Additional supplementary comments ?

No  Yes

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13l Other comments:

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