Den Danske Dyrlægeforening

On behalf of: Owner

| Name | Camilla Dalgaard |
|---------|---------------------------------|
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Main data

| Name Optimum Zolution | | Race DV C | | olor Red | Sex Stallion |
|--|--|-------------------------|--|------------------------------------|--------------|
| Birthday 04-04-2023 | | Reg No. 208333DW2330703 | | Chip 208213990537398 No. | |
| The identity and markings of the horse are in agreement with its passport: | | | | Horse is chipped: | |

The horse is being purchased for (usage): dressage, when the horse 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

| SNEDSTED | e Rasmussen | NIK |
|-----------------|---------------|-------|
| Hovedgade 3 | 5 - 7752 Snec | sted |
| rlf. 97 93 40 0 | 7 - Fax 97 93 | 47 65 |
| 1 | | |
| / / | 11 | |

11-09-2023

Date

Signature



No Yes 🖌

1. General condition

| 1a | Body condition: | A |
|------|---|------------|
| 46 | | Average |
| 1b | Abnormal fat deposits on neck or trunk ? | |
| | | No 🔽 Yes 🛄 |
| 1c | Abnormalities in general condition ? | |
| | | No 🖌 Yes |
| 1d | Other comments: | |
| | | |
| 2. 5 | Skin | |
| 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: | No 💌 Yes 📖 |
| 20 | Other comments. | |
| 3. F | lead and teeth | |
| | | |
| 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

^{3f} Are visible woolf 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 |
| Зј | Line of ferrel light during the supervised of 2 | No 💌 Yes 📖 |
| J | Use of focal light during the examination? | |
| | | No 🗹 Yes 🗌 |
| 3k | Was the oral cavity flushed with water before the examination ? | |
| | | No 🖌 Yes |
| 31 | Was a dental mirror used during the examination ? | |
| | | No 🖌 Yes |
| 3m | Was the horse sedated during the examination ? | |
| | | No 🖌 Yes |
| 3n | Other comments: | |
| 0 | Other comments. | |
| 4 | teeth, other than incisives, not evaluated | |
| 4. E | teeth, other than incisives, not evaluated | |
| 4. E 4a | | |
| | yes | No 🕑 Yes |
| | Abnormalities of the menace or pupilliary reflex ? | No 🗹 Yes |
| 4a | yes | No 🗹 Yes |
| 4a | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the | No 🗹 Yes 🗌 |
| 4a | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the | |
| 4a 4b | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? | No 🗹 Yes |
| 4a 4b | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? | |
| 4a 4b 4c | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? | No 🕑 Yes 🗌 |
| 4a 4b 4c 4d | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? Abnormal macroscopic findings of the cornea, iris or lens ? | No 🗹 Yes |
| 4a 4b 4c | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? | No 🗹 Yes 🗌 No 🗹 Yes 🗌 |
| 4a 4b 4c 4d 4e | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? Abnormal macroscopic findings of the cornea, iris or lens ? Was examination of eyes performed in a darkened room ? | No 🕑 Yes 🗌 |
| 4a 4b 4c 4d | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? Abnormal macroscopic findings of the cornea, iris or lens ? | No 🗹 Yes 🗌 No 🗹 Yes 🗌 |
| 4a 4b 4c 4d 4e | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? Abnormal macroscopic findings of the cornea, iris or lens ? Was examination of eyes performed in a darkened room ? | No 🗹 Yes 🗌 No 🗹 Yes 🗌 |
| 4a 4b 4c 4d 4e | Eyes Abnormalities of the menace or pupilliary reflex ? Abnormalities of the symmetry, position or size of the eyes and eyelids and/or the ciliary angle ? Abnormalities of the conjunctiva or third eyelid, including discharge ? Abnormal macroscopic findings of the cornea, iris or lens ? Was examination of eyes performed in a darkened room ? | No Yes |

No Yes

5. Neck

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

| | | 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 Ves |
| 5e | Other comments: | |
| 6. E | Back | |
| 6a | Abnormalities in the curvature, symmetry and muscle mass of the back and hind quarters ? | |
| 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: | No 🖌 Yes |
| | | |
| 7. 0 | 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

| At rest: Abnormalities in the peripheral circulation (mucous membranes, capillary refill time, jugular, vein, jugular pulsation) and/or ventral oedema ? | |
|--|--|
| | No 🖌 Yes |
| Abnormalities during the auscultation of the cardiac Puncta maxima (heart sounds, murmurs, arrhythmias)? | |
| | No 🖌 Yes |
| After exercise: Abnormalities in rhythm, murmurs and/or jugular pulsation after sufficient increase in pulse rate ? | |
| · | No 🖌 Yes |
| Other comments: | |
| | |
| irways | |
| At rest: Abnormalities during palpation of the upper airway lymph nodes ? | |
| | No 🖌 Yes |
| Abnormalities of the respiratory frequency or pattern ? | |
| | No 🚩 Yes 🔄 |
| Abnormalities during auscultation of the trachea or bilateral auscultation of the thorax ? | |
| | No 🖌 Yes |
| Is nasal discharge noticed ? | |
| in yes, what type of discharge ? | No Yes |
| During exercise: Abnormal audible respiratory sounds ? | |
| | No 🖌 Yes |
| Post exercise: Abnormalities related to the airways following exercise (respiratory rate, abnormal sounds or discharge) ? | |
| | No 🖌 Yes |
| Any signs of coughing while examining the horse? | |
| | No 🖌 Yes |
| Other comments: | |
| | |
| | refill time, jugular, vein, jugular pulsation) and/or ventral oedema ? Abnormalities during the auscultation of the cardiac Puncta maxima (heart sounds, murmurs, arrhythmias)? After exercise: Abnormalities in rhythm, murmurs and/or jugular pulsation after sufficient increase in pulse rate ? Other comments: It ways At rest: Abnormalities during palpation of the upper airway lymph nodes ? Abnormalities of the respiratory frequency or pattern ? Abnormalities during auscultation of the trachea or bilateral auscultation of the thorax ? Is nasal discharge noticed ? If yes, what type of discharge ? Post exercise: Abnormalities related to the airways following exercise (respiratory rate, abnormalities related to the airways following exercise (respiratory rate, abnormal sounds or discharge)? Any signs of coughing while examining the horse? |

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



^{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 ?



| | | RF: No 🗹 Yes |
|-----|--|----------------|
| | | LH: No 🗹 Yes |
| | | RH: No 🕑 Yes 🗌 |
| 11b | Abnormalities in the landing-, weightbearing- and/or protraction phases of the hoof | RH: No 🖳 Yes 📖 |
| | 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 ? | RH: NO 💌 Yes 📖 |
| | At the for on a him surface. Any gait abnormalities / hameness : | 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 | |
| 11i | Age of the horse | |
| | Lunging on soft surface on both left and right rein has not been performed Age of the horse | |
| | Seen loose in outdoor arena | |
| 111 | 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 |
| | | |
| 11n | Any charge potent in the heree's reaction when doing rain heat (4.6 steps) 2 | BB: No 🚩 Yes 🛄 |
| 11n | Any abnormalities noted in the horse's reaction when doing rein-back (4-6 steps)? | |
| 11- | | No 🗹 Yes |
| 110 | Other comments: | |
| | | |
| 12. | Behavior | |
| 12a | Does the horse show signs of abnormal behavior during the clinical assessment ? | |
| | | No 🖌 Yes |
| 12b | Other comments: | |

13. Additional examinations or reports

| 13a | Has a radiographic examination taken place? | |
|-----|---|------------|
| | | No 🗹 Yes 🗌 |
| 13c | Is ridden assesment performed? | |
| | | No 🖌 Yes 🗌 |
| 13g | Extended examination deemed required for the following organ system | |
| | | No 🖌 Yes |
| 13i | Has a blood sample been obtained for medication control? | |
| | | No 🖌 Yes |
| 13j | Additional supplementary comments ? | |
| | | No 🖌 Yes |
| 131 | Other comments: | |
| 131 | Other comments: | |