



APPENDIX 4: Protocol – Health Certificate

Document 1: Health certificate for foal and yearling

CERTIFICATE OF EXAMINATION FOR FOAL and YEARLING

Name of horse: Frohsinn
Sire: Feinlich
Dam: Scally
Sire of Dam: Stoiber SN
Date of birth: 17.04.2020
Location of the horse: NAW

Coat Color: Brown
Sex: Male
Microchip N°: _____
Passport N° (if existing): _____
Studbook: _____

- General state of the foal: O.B.
- Cardiovascular examination: O.B.
- Vision tests and eyes examination: O.B.
- Respiratory examination: O.B.
- Possible limbs default: O.B.
- Potential abnormality in the musculoskeletal system (in particular the presence of joint distension): O.B.
- Abdominal hernia detected: YES / (NO)
- For colts, the testicles are palpable: (YES) / NO
- Signs of infectious disease detected: YES / (NO)

If weaned foal, date of last worming:

If weaned foal, date of last vaccination:

I, the undersigned, Dr. Winter, certify having examined the foal above and am the usual veterinarian of this breeder.

In April, the 13.7.20

Stamp and signature:

Dr. G. u. B. Küsters

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