

Check a cross

N: Normal

S: Suspect

A: Abnormal

NR: Not Realized

Horse's name: \_\_\_\_\_

Identification number: \_\_\_\_\_

RF: low grade paddeling

| Clinical examination report                                                                                                                                                                                           |   |   |   |    |                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|----|----------------------------|
| Examinations                                                                                                                                                                                                          | N | S | A | NR | Observations               |
| <b>At rest</b>                                                                                                                                                                                                        |   |   |   |    |                            |
| - general condition                                                                                                                                                                                                   | X |   |   |    |                            |
| - Symmetry                                                                                                                                                                                                            | X |   |   |    |                            |
| - Limbs                                                                                                                                                                                                               |   | X |   |    | LF: low grade goat hoof; → |
| - State of the mucous membranes                                                                                                                                                                                       | X |   |   |    |                            |
| - State of the mouth and teeth                                                                                                                                                                                        | X |   |   |    |                            |
| - State of the coat                                                                                                                                                                                                   | X |   |   |    |                            |
| - State of the musculoskeletal system                                                                                                                                                                                 | X |   |   |    |                            |
| - Vertebral axis                                                                                                                                                                                                      | X |   |   |    |                            |
| - Apparent blemish                                                                                                                                                                                                    | X |   |   |    |                            |
| - Cardiac auscultation                                                                                                                                                                                                | X |   |   |    |                            |
| Number of pulses / minute                                                                                                                                                                                             | X |   |   |    | 30/min                     |
| - Examination of apparent vascular pathways                                                                                                                                                                           | X |   |   |    |                            |
| - Pulmonary auscultation                                                                                                                                                                                              | X |   |   |    |                            |
| <b>At the effort</b>                                                                                                                                                                                                  |   |   |   |    |                            |
| - Paces (suppleness, cadence, ground covering, path)                                                                                                                                                                  | X |   |   |    |                            |
| - Paces examination                                                                                                                                                                                                   |   |   |   |    |                            |
| <b>On hard ground</b>                                                                                                                                                                                                 |   |   |   |    |                            |
| - trot in a straight line                                                                                                                                                                                             | X |   |   |    |                            |
| - trot on the right hand circle                                                                                                                                                                                       | X |   |   |    |                            |
| - trot on the left hand circle                                                                                                                                                                                        | X |   |   |    |                            |
| <b>On soft ground</b>                                                                                                                                                                                                 |   |   |   |    |                            |
| - trot on the right hand circle                                                                                                                                                                                       | X |   |   |    |                            |
| - canter on the right hand circle                                                                                                                                                                                     | X |   |   |    |                            |
| - trot on the left hand circle                                                                                                                                                                                        | X |   |   |    |                            |
| - canter on the left hand circle                                                                                                                                                                                      | X |   |   |    |                            |
| <b>Bending test:</b> - Right anterior end                                                                                                                                                                             | X |   |   |    |                            |
| - Left anterior end                                                                                                                                                                                                   | X |   |   |    |                            |
| - Stifle - Hock right posterior                                                                                                                                                                                       | X |   |   |    |                            |
| - Stifle - Hock left posterior                                                                                                                                                                                        | X |   |   |    |                            |
| <b>Navicular test (plank test):</b> - Right anterior                                                                                                                                                                  | X |   |   |    |                            |
| - Left anterior                                                                                                                                                                                                       | X |   |   |    |                            |
| <b>After the effort</b>                                                                                                                                                                                               |   |   |   |    |                            |
| - Cardiac auscultation                                                                                                                                                                                                | X |   |   |    |                            |
| Number of pulses / minute                                                                                                                                                                                             | X |   |   |    | 64/min                     |
| - After 10 minutes                                                                                                                                                                                                    | X |   |   |    | 36/min                     |
| - Pulmonary auscultation                                                                                                                                                                                              | X |   |   |    |                            |
| - State of the musculoskeletal system                                                                                                                                                                                 | X |   |   |    |                            |
| - Vertebral axis                                                                                                                                                                                                      | X |   |   |    |                            |
| <b>Ophthalmological examination</b>                                                                                                                                                                                   | X |   |   |    |                            |
| <b>Vaccination:</b> Influenza <input checked="" type="checkbox"/> Tetanus <input checked="" type="checkbox"/> Rabies <input type="checkbox"/> Rhinopneumonia <input type="checkbox"/> Other: <input type="checkbox"/> |   |   |   |    |                            |
| Date: 10.06.22 Date: 10.06.22 Date: Date: Date:                                                                                                                                                                       |   |   |   |    |                            |
| Possible additional examinations:                                                                                                                                                                                     |   |   |   |    |                            |
| Other observations:                                                                                                                                                                                                   |   |   |   |    |                            |

Veterinarian's stamp

Patricia Zweverink  
prakt. Tierärztin  
Wallmichrather Str.7- 42555Velbert 1  
Mobil: 0151 - 11 74 99 80

A radiographic examination was carried out using 14 identified X-Ray images

Signature: 