

APPENDIX 4: Protocol – Health Certificate

Document 1: Health certificate for the foals

CERTIFICATE OF EXAMINATION FOR FOAL

Sire: **CHACCO BLUE**
Sire of Dam: **SHINDLER DE MUZE**
Coat color: **CHESTNUT**
Date of birth: **02/08/2023**

Dam: **HIEPER DE PIEP DE MUZE**
Sex: **FEMALE**
Micro chip N°:
Localisation of the foal: **KASTERLEE, BELGIUM**

- General state of the foal: **GOOD**
- Cardiovascular examination: **NORMAL**
- Vision tests and eyes examination: **NORMAL**
- Respiratory examination: **NORMAL**
- Possible limbs default: **NONE**
- Potential abnormality in the musculoskeletal system (in particular the presence of joint distension): **NONE**
- Abdominal hernia detected: YES / **NO**
- For colts, the testicles are palpable ~~YES~~ **is a FILLY**
- Signs of infectious disease detected: YES / **NO**

STERILITY EXP 2028-08



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If weaned foal, date of last worming:

If weaned foal, date of last vaccination:

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

In **KASTERLEE**, the **16/10/2023**

Stamp and signature:

Dr. Paul Buyens

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