

#### APPENDIX 4: Protocol – Health Certificate

##### Document 2: Examination of the mare (surrogate mother and biological mother)

Biological mare / Surrogate mare (circle the right condition)

Name: *J'adore can't Bishop*  
 Studbook: *BWP*  
 Date of birth: *13/5/2000*  
 Passport N°: *056-002-W00201102*  
 Size: *1.61 m*

N° of transponder: *567-000001345554*  
 Last worming: *1/10/2022*  
 Flu Vaccination, last reminder: *3/10/22*  
 Rhinopneumonia vaccination: *3/10/22* (*booster*)  
 Location: *Maarhee 26* *nov 2021*

##### General clinical examination:

|                                                       |               |                |          |
|-------------------------------------------------------|---------------|----------------|----------|
| Character and behaviour :                             | <u>Normal</u> | Reserved       | Abnormal |
| General health :                                      | <u>Normal</u> | Reserved       | Abnormal |
| Redhibitory defects :                                 | <u>Normal</u> | Reserved       | Abnormal |
| Rectal temperature :                                  | <u>Normal</u> | Reserved       | Abnormal |
| Cutaneous examination (scars, sarcoid?)               | <u>Normal</u> | Reserved       | Abnormal |
| Ophthalmological examination                          | <u>Normal</u> | Reserved       | Abnormal |
| Presence or suspicion of uveitis?                     | <u>No</u>     | Yes            |          |
| Sensory system (vision, vigilance, reflexes, balance) | <u>Normal</u> | Reserved       | Abnormal |
| Signs of lameness?                                    | <u>No</u>     | Yes – degree/5 |          |
| Examination of mucous membranes                       | <u>Normal</u> | Reserved       | Abnormal |
| Mouth and set of teeth – wolf tooth?                  | <u>No</u>     | Yes            |          |
| Digestive auscultation                                | <u>Normal</u> | Reserved       | Abnormal |
| Vascular routes examination                           | <u>Normal</u> | Reserved       | Abnormal |
| Cardiac auscultation                                  | <u>Normal</u> | Reserved       | Abnormal |
| Presence or suspicions of cardiac breath?             | <u>No</u>     | Yes – degree/5 |          |
| Lung auscultation                                     | <u>Normal</u> | Reserved       | Abnormal |
| Presence or suspicion of emphysema ?                  | <u>No</u>     | Yes – degree/5 |          |
| External reproductive organ                           | <u>Normal</u> | Reserved       | Abnormal |
| Morphology                                            | <u>Normal</u> | Reserved       | Abnormal |
| Symmetries                                            | <u>Normal</u> | Reserved       | Abnormal |
| Balances                                              | <u>Normal</u> | Reserved       | Abnormal |
| Imperfections and defects                             | <u>Normal</u> | Reserved       | Abnormal |
| Tendons and ligaments aspects                         | <u>Normal</u> | Reserved       | Abnormal |
| Track of tendinitis or former desmitis?               | <u>No</u>     | Yes            |          |

|                                               |                                         |          |          |
|-----------------------------------------------|-----------------------------------------|----------|----------|
| Feet and horseshoes                           | <input checked="" type="radio"/> Normal | Reserved | Abnormal |
| Vertebral axis: conformation and manipulation | <input checked="" type="radio"/> Normal | Reserved | Abnormal |
| Presence or suspicion of dorsalgia?           | <input checked="" type="radio"/> No     | Yes      |          |
| <b>General examination conclusion:</b>        |                                         |          |          |

**In a case of a mare in foal:**

|                                              |                                         |                                     |
|----------------------------------------------|-----------------------------------------|-------------------------------------|
| Is the mare pregnant?                        | Yes                                     | <input checked="" type="radio"/> No |
| Termin date:                                 |                                         |                                     |
| In foal to (name of the Sire):               |                                         |                                     |
| Udder examination                            | <input checked="" type="radio"/> Normal | Reserved Abnormal                   |
| Movement of the foal by palpation            | Normal                                  | Reserved Abnormal                   |
| Absence of twin gestation                    | Yes                                     | No                                  |
| Surgical history on the reproductive system: |                                         |                                     |
| Vulvoplastie                                 | Yes                                     | <input checked="" type="radio"/> No |
| <b>Conclusion: Gestation at risk:</b>        | Yes                                     | No                                  |

I undersigned Dr \_\_\_\_\_, have realised an echography of the mare (name of the mare) \_\_\_\_\_ and confirm her good pregnancy of at least 45 day:

**In the case of an empty mare or maiden:**

|                                           |                                         |                                     |
|-------------------------------------------|-----------------------------------------|-------------------------------------|
| Vulva examination                         | <input checked="" type="radio"/> Normal | Abnormal                            |
| Vulvoplastie                              | Yes                                     | <input checked="" type="radio"/> No |
| Ovaries examination                       | <input checked="" type="radio"/> Normal | Abnormal                            |
| Womb examination                          | <input checked="" type="radio"/> Normal | Abnormal                            |
| <b>Conclusion: Reproductive capacity:</b> | <input checked="" type="radio"/> Yes    | No                                  |

Made in: Maarhee

Date: 27/10/22

Signature and stamp of the veterinarian + Initial on each page:

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