

APPENDIX 4: Protocol – Health Certificate

Document 1: Health certificate for the foals

CERTIFICATE OF EXAMINATION FOR FOAL

Sire: *Chacco Blue*
Sire of Dam: *Dominator 2000 Z*
Coat color: *Brown*
Date of birth: *08.05.2024*

Dam: *KTO Terminator*
Sex: *Male*
Micro chip N°: *528210008106678*
Localisation of the foal: *Mander-NL*

- General state of the foal: *ok*
- Cardiovascular examination: *ok*
- Vision tests and eyes examination: *ok*
- Respiratory examination: *ok*
- Possible limbs default: *no*
- Potential abnormality in the musculoskeletal system (in particular the presence of joint distension): *No*
- 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. *B.J.G. Hammit*, certify having examined the foal above and am the usual veterinarian of this breeder.

In *Mander*, the *Netherlands*

Stamp and signature:

27/9/2024 *B.J.G. Hammit*
