

**APPENDIX 4: Protocol – Health Certificate****Document 1: Health certificate for the foals**

CERTIFICATE OF EXAMINATION FOR FOAL

Sire: *Diamant de Semilly*
Sire of Dam: *Casall*
Coat color: *bay*
Date of birth: *18.03.2024*

Dam: *Montendra I KNT*
Sex: *stallion*
Micro chip N°: *246020000940393*
Localisation of the foal: *Nowy Tomysl*

- General state of the foal:
correct
- Cardiovascular examination:
correct
- Vision tests and eyes examination:
correct
- Respiratory examination:
correct
- Possible limbs default:
not present
- Potential abnormality in the musculoskeletal system (in particular the presence of joint distension):
not present
- 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: *04.10.2024*
If weaned foal, date of last vaccination: *16.10.2024*

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

In *Nowy Tomysl*, the *16.10.2024*

Stamp and signature:

Małgorzata Skudlarek
Lecarz weterynarii
Glinno 65
64-300 Nowy Tomysl

