

APPENDIX 4: Protocol – Health Certificate

Document 1: Health certificate for the foals

CERTIFICATE OF EXAMINATION FOR FOAL

Sire: *CHACCO BLUE* Dam: *ANTOKRA VG*
Sire of Dam: *BURGGRAAF* Sex: *FEMALE*
Coat color: *BAY* Micro chip N°: *981100006147204*
Date of birth: *29/05/2024* Localisation of the foal: *BELGIUM*

- General state of the foal: *normale*
- Cardiovascular examination: *normale*
- Vision tests and eyes examination: *normale*
- Respiratory examination: *normale*
- Possible limbs default: *NEANT*
- Potential abnormality in the musculoskeletal system (in particular the presence of joint distension): *NEANT*
- Abdominal hernia detected: YES ☒ NO
- For colts, the testicles are palpable: YES / NO *= FEMALE*
- Signs of infectious disease detected: YES ☒ NO

If weaned foal, date of last worming: *1/12/2024*
If weaned foal, date of last vaccination: *NO VACCINATION YES*

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

In *Lichtaart*, the *12/12/2024*

Stamp and signature:


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