

Clinical Examination Report Auction Foal



Name Foal: DUVEL DE LEAU 2 Date of birth: 20/4/26
 Chipnumber: 98100 024 432 117 Sex: colt filly
 Sire: DJANGO 2 Dam's Sire: CICERO 2
 Color: Bai

1. General condition

State of nutrition	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Normal	<input type="checkbox"/> Inadequate
General appearance	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Normal	<input type="checkbox"/> Inadequate
Coat condition	<input checked="" type="checkbox"/> Good	<input type="checkbox"/> Normal	<input type="checkbox"/> Inadequate
Remarks	_____		

2. Are there any defects in

Eyes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Teeth	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Overbite	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes (upper and lower teeth DON'T touch)
Nose	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Discharge from the nose	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes
Remarks	_____	

3. Is the respiration normal?

If not, describe? No Yes _____
 Have you observed any spontaneous coughing? No Yes
 Remarks _____

4. Are there any symptoms which may indicate a poor or abnormal digestion? No Yes

Remarks _____

5. Is the heartbeat at rest normal? No Yes

Are there any heart murmurs? No Yes

6. Are there any abnormalities such as abnormal hoof shape, soft or hard tissue swelling or joint effusions? No Yes

Are there any limb deformations? No Yes

Remarks _____

7. Are there any defects of the external genitalia? If so, what are they? No Yes

If stallion: Testicles palpable? No Yes Only left Only right

Remarks _____

8. Is there any sign of an umbilical or an inguinal hernia? No Yes

Remarks _____

9. Does the foal show gait abnormalities? No Yes

If yes what are the abnormalities? _____

10. Are there any other significant clinical signs present that must be indicated to your opinion?

No Yes: _____

29/6/26
 Date of the examination

Bodien Boelens
 Name of veterinarian

Signature, stamp of veterinarian

Dierenarts Bodien Boelens
 Dorpstraat 22
 3350 Melkwezer
 Ordenummer: N5143