Examination report - Surrogate mare

I, Dr. EVELINE VAN HOVE, declares to have examined the surrogate mare written

Name surrogate mare : Vero
nr Optimus: **169**
In foal of (stallion x dam): Impress-K van 't Kattenheye x Cacacha van het Schaeck
Date of inplantation: 21/07/2026
Chip number receptor mare: 981100004783819
Owner receptor mare: Optimus Agro nv
Place (address) of receptor ma Mollentstraat 47b, 2520 Broechem, Belgium

1. What is the nutritional condition, general appearance and skin ?

GOOD

2. Does the mare breath normal? Is there spontanous coughing ? Is there nasal discharge?

NORMAL

3. Are there any signs which indicate a bad or normal digestion?

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4. What is the heart rate at rest and after exercise?

R: 48/min E: 72/min

5. Are there any abnormaltities to the external genitals? If yes, what kind?

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6. Are there any other signs or / and remarks that must be indicated?
If yes, please discribe below.

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The undersigned declares, having controlled the above mare on gestation through ultrasound on date of 23/10/2026

Date: 23/10/2026
Place: BROECHEM
Name: EVELINE VAN HOVE
Signature:

Dr. Eveline Van Hove
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