

## Examination report - Surrogate mare

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

|                                    |   |
|------------------------------------|---|
| Name surrogate mare :              | Hydra Rem                                 |
| nr Optimus:                        | 94  |
| In foal of (stallion x dam ):      | Stakkato x Jillonse DH                    |
| Date of inplantation:              | 5/04/2023                                 |
| Chip number receptor mare:         | 250259600578964                           |
| Owner receptor mare:               | Optimus Agro nv                           |
| Place (address) of receptor mare : | Mollentstraat 47b, 2520 Broechem, Belgium |

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

Good

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

NORMAL

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

NO

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

R: 44/min E: 76/min

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

/

6. Are there any other signs or / and remarks that must be indicated?

If yes, please discribe below.

/

The undersigned declares, having controlled the above mare on gestation through ultrasound on date of 6/10/23

Date: 6/10/23

Place: BROECHEM

Name: .....

Signature: .....

Dr. Eveline VAN HOVE

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