## Examination report

I, Dr. EVELINE VAN HOVE..., declares to have examined the foal written below and to have filled in the form truthfully.

| | | | |
|---|---|---|---|
| **Name foal :** | **D'Artagnan Optimus** | **sex :** | **stallion** |
| **Mother :** | **Cacacha van het Schaeck** | | |
| **Father :** | **United Touch** | **Day of birth:** | **30/04/2026** |
| **Color :** | **Chestnut** | **Chip:** | **981100006232176** |

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

GOOD

2. Are there abnormalities to eyes, teeth or nose? Is ther any mucus?

/

3. Does the foal breath normal? Is there spontanous coughing ?

NORMAL

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

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

R: 48/min E: 82/min

6. Are there any abnormaltities to legs or hooves, like different feet, thikening of tendons, bones or joints?

/

7. Are there sign of lameness in walk and trot?

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

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Date: 20/01/2026
Place: BROECHEM

Name: EVELINE VAN HOVE
Signature:

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