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 :	**Deauville Optimus**	**sex :**	**stallion**
Mother :	**Kassandra Optima**		
Father :	**Excelsior Optimus**	**Day of birth:**	**11/03/2026**
Color :	**Chestnut**	**Chip:**	**981100006232071**

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: 72/min

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

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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.

HERNIA UMBILICALIS

A decision will be made within 2 weeks as to wether the umbitcal hernia should be treated surgically. Optimus will bear all costs and risks associated with this treathment. The purchase price of the foal will only be payable after the surgical procedure has been completed. A new veterinary report, confirming the outcome of the treathment will be issued.

Date: 19/10/2026
Place: BROECHEM

Name: EVELINE VAN HOVE
Signature:

Dr. Eveline Van Hove
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