

# VETERINARIAN FORM KATTENHEYE AUCTION FOALS

The undersigned veterinary, SCHEPENS MARTIN declares that the foal described below has been examined and that this form has been completed to the best of his/her knowledge.

Name foal: ANGIE KATTENHEYE - DONKHOEVE Chip nr: \_\_\_\_\_  
 Gender:  colt  filly Date of birth: 22/5/2023  
 Color: \_\_\_\_\_ Pedigree: Castello T x Glenfiddich  
 Owner: Tony & Mieke Raman - Kattenheye  
 City: Laarne - Belgium

1. How are:  
 State of nutrition  good  normal  inadequate  
 General Appearance  good  normal  inadequate  
 Coat conditions  good  normal  inadequate  
 Comments \_\_\_\_\_

2. Are there any defects in:  
 Eyes  no  yes defects  
 Teeth  no  yes defects  overbite ..... 2 ..... mm  
 Nose  no  yes defects  
 Discharge from the nose  no  yes defects  
 Comments \_\_\_\_\_

3. Is the respiration normal?  yes  no  
 If not, what is the defect? \_\_\_\_\_  
 Have you observed any spontaneous coughing?  no  yes  
 Comments \_\_\_\_\_

4. Are there any symptoms which indicate a poor or abnormal digestion?  no  yes  
 Comments \_\_\_\_\_

5. What is the state of the heartbeat and pulse at rest and after trot?  normal  aberrant  
 Are there any heart murmurs?  no  yes

6. Are there any defects concerning the limbs and hooves such as defective hoof shape, thickening of tendons or bones or enlargement of any joints?  no  yes, see comments  
 Are there any limb deformities?  no  yes, see comments  
 Comments \_\_\_\_\_

7. Are there any defects of the external genitalia? If so, what are they?  no  yes  
 If stallion: 2 testicles  yes  no  
 testicles descended  yes  no  
 Comments \_\_\_\_\_

8. Is there any sign of an umbilical or a inguinal hernia?  
 no  yes  
 Comments \_\_\_\_\_

9. Does the foal show defects in walk and/or trot? If yes, what are the defects?  
 no  yes  
 Comments \_\_\_\_\_

10. Are there any other symptoms of sickness, defects or faults that must be indicated for sales?  
 If so, which ones?  
 yes  no  
 Comments \_\_\_\_\_

Date: 30/08/2023  
 Name: SCHEPENS MARTIN

Place: \_\_\_\_\_  
 Signature and stamp: Dokter M. SCHEPENS  
 DIERENARTS  
 DORPSLAAN 19  
 HEUSDEN 8070