



Recording of the clinical investigation foals for the auction/ inspection

Seller: _____

Foal Name: Feuerblitz birth: 3.5.24

UELN: _____ colour/ sex: Heugst

Pedigree: Fidertanz / Daily Diamond

generell and special investigation:

1.	skin, coat, body temperature, behavior	normal <input checked="" type="checkbox"/>	part.: scars/fungal infection
2.	heart, lung (auscultation)	normal <input checked="" type="checkbox"/> normal <input checked="" type="checkbox"/>	part.: part.: heart noise/showy lung noise
3.	Eyes	normal <input checked="" type="checkbox"/>	part.:
4.	mouth/teeth (handhold)	normal <input checked="" type="checkbox"/>	part.:
	overbite	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>
5.	nose/lymph nodes	normal <input checked="" type="checkbox"/>	part.: outflow/swelling
	coughing	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>
6.	umbilicus	normal <input checked="" type="checkbox"/>	part.: umbilical hernia/surgery.
7.	colt: testicles	normal <input checked="" type="checkbox"/>	part.: size/consistence
	both testicles palpable	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	both testicles were descended	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	findings after sedation:		
8.	locomotor system: hoofs/joints	normal <input checked="" type="checkbox"/>	part.: position/contracted hoof/bound hoof/windgall/swelling
9.	lameness/movement disorder	No <input checked="" type="checkbox"/>	part.: ataxia/muscular athrophy
10.	other conspicuous	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>
11.	medical history	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> which:

12. comments

*normal = without any pathologic findings

part. = particularitis

place & date of the investigation:

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prakt. Tierärztin

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signature/Vet