

LOSS OF USE – ACCIDENT, ILLNESS OR DISEASE EXAMINATION

OWNER NAME: _____ NAME OF HORSE: _____

AGE: _____ BREED: _____ INTENDED USE: _____

NORMAL

EXPLAIN ANY ABNORMAL FINDINGS

I. Examination for lameness at a walk and trot
 In a straight line and small circles in both
 directions on a hard surface: _____

II. RADIOGRAPHS OF THE NAVICULAR BONES, THE PROXIMAL SESAMOID BONES, THE FETLOCK JOINTS AND THE TARSAL JOINTS ARE REQUIRED. <<A STANDARD VET CERTIFICATE IS ALSO REQUIRED.>>

ASSESSMENT OF RADIOGRAPHS

Navicular bones	LF	_____	_____
	RF	_____	_____
Proximal sesamoid bones	LF	_____	_____
	RF	_____	_____
Fetlock joints	LF	_____	_____
	RF	_____	_____
Tarsal joints	LF	_____	_____
	RF	_____	_____

III. Left forelimb	Flexion Test	_____	_____
	Palpation of Limbs	_____	_____
	Response to Hoof Testers	_____	_____
Right forelimb	Flexion Test	_____	_____
	Palpation of Limbs	_____	_____
	Response to Hoof Testers	_____	_____
Left hindlimb	Flexion Test	_____	_____
	Palpation of Limbs	_____	_____
	Response to Hoof Testers	_____	_____
Right hindlimb	Flexion Test	_____	_____
	Palpation of Limbs	_____	_____
	Response to Hoof Testers	_____	_____

Are you aware of any history of unsoundness, injury or disease in this horse? _____

Other findings or remarks: _____

Signature of Veterinarian _____

Date of Exam _____

Address _____

Phone Number _____