PRE-SALE EQUINE PHYSICAL SURVEY (RECOMMENDED) Horse's Name ______ Breed __ Year Foaled Consignor - First Last Owner | Agent Owner - First Last REMINDER - ORIGINAL NEGATIVE COGGINS DRAWN WITHIN 12 MONTHS OF THE DATE OF THE AUCTION REQUIRED Date of Examination: 2917 Place of Examination: VYMVCI Medical History (Colic, Founder, Surgery, Intestinal Disorders, Lameness, Respiratory, Nerves, etc.) **Clinical Evaluation** Body Temperature: \公,山 Eyes: INNL Skin: W Tumors: NON SERIO Scars: NONE Cardiovascular (Heart Rate /Respiratory): 172:36 R2:38 auscultation unl Evidence of Bleeder: VONE SEEN Gastrointestinal / Feces: UNL Neurological / Musculoskeletal: _____ **Equine Physical Survey** Indication of Lameness: NMC Seen Evidence of Founder or Laminitis: WMC Seen Feet:: Left Fore: Right Fore: Left Hind: Right Hind: Limbs (Examine for lameness, enlargements, abnormalities, etc.) Right Fore: Left Hind: Right Hind: Urogential (Penis, Testicles, Prepuce) (Vulva, Vagina, Urethral Orifice, Cervix): 10 testicles palpated **Broodmares** - Vaginal Exam: Culture (on open mare being offered as broodmare): Broodmares - Pregnant: _____ If open - Palpation (Ovaries, Uterus, Cervix): ____ Comments, Observations and Recommendations: Address: Phone:

Flashpoint Bloodstock, LLC has the right to refuse any horse based on the results of this examination or any information known to the consignor regarding suitability of sale. If there is any doubt as to the suitability of any horse for sale purposes, notify the sale management.