Year Foaled 20(6 Color				
Consignor - First				Owner Mass
Owner - First	Last			TION REQUIRED
REMINDER - ORIGINAL NEGATIVE COGGINS Date of Examination: 7-16-2 320	Diace of Examina	tion. Not vio 1/41	INS NUC I TO	
Medical History (Colic, Founder, Surger)	, Intestinal Diso	rders, Lameness, Re	spiratory, Nerv	es, etc.)
Clinical Evaluation				normal (needs teet
Body Temperature: 100.0 Skin: Good Condition	_ Eyes: Tumors: /	none observed	Scars:	none observed
Cardiovascular (Heart Rate /Respiratory): _	32/24			
	The second seal		numel	
vidence of Bleeder: NO		strointestinal / Feces:	110012	
eurological / Musculoskeletal:				
quine Physical Exam		Evidence of Found	er or Laminitis:	nune
dication of Lameness: None				
et:: Left Fore: Ok			ok	
Left Hind: 0 k		_ Right Filld		
nbs (Examine for lameness, enlargemen) Bight Force	ok	
Left Fore: OK Left Hind: OK		_ Right Hind: _	ok	
gential (Penis, Testicles, Prepuce) (Vulv				Costate approved
gential (Penis, Testicles, Prepuce) (Vulv	a, Vagina, Ureth	rai Orifice, Cervix)	convac	Chi) (ICE) Parison
<u>odmares</u> - Vaginal Exam: Culture (on o	pen mare being	offered as broodmar	e):	化学生的
odmares - Pregnant: IF o				
ments, Observations and Recommenda	ations:			A CONTRACTOR OF THE PARTY OF TH
				THE STATE OF THE S
Al I V				7-11-100
ining Veterinarian: Nick Fenn	edy	Λ (I)	Date:	1-16-2020 n 87120
ss: 549 2715 Busque 0	19/501 LA	NW HID	querque Ni	1 81170
505 453 4539		TAR BUT YES		

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