

PRE-SALE EQUINE PHYSICAL SURVEY (REQUIRED)

Horse's Name Flight Song Breed Tb
Year Foaled 2016 Color Bay Sex Filly

Consignor - First _____ Last _____ Owner ☐ Agent ☐
Owner - First _____ Last _____

REMINDER - ORIGINAL NEGATIVE COGGINS DRAWN WITHIN 11 MONTHS OF THE DATE OF THE AUCTION REQUIRED

Date of Examination: 7/17/20 Place of Examination: RORT

Medical History (Colic, Founder, Surgery, Intestinal Disorders, Lameness, Respiratory, Nerves, etc.)

None to my knowledge

Clinical Evaluation

Body Temperature: 99.5 Eyes: OK Mouth: OK
Skin: OK Tumors: none noted Scars: none noted

Cardiovascular (Heart Rate /Respiratory): normal

Evidence of Bleeder: lax Gastrointestinal / Feces: normal

Neurological / Musculoskeletal: normal

Equine Physical Exam

Indication of Lameness: none @ walk Evidence of Founder or Laminitis: no

Feet:: Left Fore: OK Right Fore: OK

Left Hind: OK Right Hind: OK

Limbs (Examine for lameness, enlargements, abnormalities)

Left Fore: OK Right Fore: OK

Left Hind: OK Right Hind: OK

Urogenital (Penis, Testicles, Prepuce) (Vulva, Vagina, Urethral Orifice, Cervix): casicles

Broodmares - Vaginal Exam: Culture (on open mare being offered as broodmare): NA

Broodmares - Pregnant: _____ IF open - Palpation (Ovaries, Uterus, Cervix): _____

Comments, Observations and Recommendations: _____

Examining Veterinarian: JASON SCOTT, DVM Date: 7/17/20

Address: P.O. Box 9 Sunland Park, NM 88063

Phone: _____

ThoroughbredAuctions.com 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.

Send Completed Pre-Sale Equine Physical Survey Form to info@ThoroughbredAuctions.com
or Mail to: ThoroughbredAuctions.com LLC • 275 Battlevue Terrace • Charles Town, WV 25414
(866) 652-7789 (phone & fax) • Email: info@ThoroughbredAuctions.com