

Veterinary Certificate of Health – Equine Insurance

Horse

Owner Policy No.....

Last Name First Name

Address Tel. Privat

..... Tel. Mobile

City / Postal Code E-Mail

SIGNALS

Name Sex Race Colour

Date of birth Passport-No. / Transponder

Signals (if the above information is missing)

Nature of use

VETERINARY EXAMINATION

In case of any defects, please provide further details at the end of this questionnaire ("remarks / comments)

1. General Condition

- 1.1. Anatomy without special diagnosis changed
- 1.2. Model without special diagnosis changed
- 1.3. Character / Behaviour without special diagnosis changed
- 1.4. Vices (look at teeth as well) no yes which:
- 1.5. Nutrient status normal lean fat
- 1.6. Pelage / Mucosa without special diagnosis changed
- 1.7. Cutaneous and subcutaneous efflorescences no yes
- 1.8. Scar / Neurectomy / Operation no yes

2. Locomotor system

- 2.1. Posture front without special diagnosis changed
- 2.2. Posture behind without special diagnosis changed
- 2.3. Musclin / Asymmetries without special diagnosis changed
- 2.4. Palpation: changes in bones or soft parts no yes

- 2.5. Movements in straight steps and trot without special diagnosis changed
- 2.6. Movements in volte: steps and trot; hard and soft ground
- right without special diagnosis changed
 - left without special diagnosis changed
- 2.7. Movement in volte in Gallop / below rider without special diagnosis changed
- 2.8. Backward turn without special diagnosis changed
- 2.9. Turn-over pain no yes
- 2.10. Bend test of distal and proximal joints:
- Front 2x each without special diagnosis positive
 - Behind 2x each without special diagnosis positive
- 2.11. Bend pain no yes
- 2.12. Plank test (Navicular bone) without special diagnosis positive
- 2.13. Hooves: profile, symmetry, horn quality without special diagnosis changed
- 2.14. Horse shoeing normal special
- 2.15. Hammer, plier testing without special diagnosis positive
- 2.16. Examination of the back without special diagnosis changed
- 2.17. Examination of the neck without special diagnosis changed

3. Heart / Circulation and respiratory organs

- 3.1. Heart auscultation without special diagnosis changed
- Heart rate, resting without special diagnosis changed
 - Heart rate, after exercise without special diagnosis changed
- 3.2. Lung auscultation without special diagnosis changed
- Respiratory frequency, resting without special diagnosis changed
 - Respiratory frequency, after exercise without special diagnosis changed
- 3.3. Spontaneous cough no yes
- Provoked cough no yes
 - Breath sound no yes
- 3.4. Nose outflow no yes
- 3.5. Jugular vein without special diagnosis changed
- 3.6. Breath sound, in stress no yes

4. Other Organs

- 4.1. Eyes without special diagnosis changed
- 4.2. Nose without special diagnosis changed
- 4.3. Ear without special diagnosis changed
- 4.4. Mouth / Denture without special diagnosis changed
- 4.5. Digestive system + faecal consistency without special diagnosis changed
- 4.6. Urine and sex organ of the mare
- Vagina plastic no yes
 - Cycle without special diagnosis changed
 - Rectal examination without special diagnosis changed not done
 - Bacteriological test no yes

Urine and sex organ of the stallion and gelding

- Palpation (testicle descend.) without special diagnosis changed castrated
- Rectal examination without special diagnosis changed not done
- Castration scar normal yes no

4.7. Nervous system without special diagnosis changed

5. Additional questions for breeding mares

- 5.1. Date of last foaling?
- 5.2. Pregnant since?
- 5.3. During the last 2 years, did the mare have any abortion?.....
If yes, date and reason?

6. Wounds and scars

- 6.1. Location
- 6.2. Cause

7. Surgical scars (Colic, Roarer, Kopper, Neurectomy, others)

- 7.1. location

8. Vaccination Status

9. Serum taken nein ja

10. Laboratory examination

11. Consideration for acceptance under special conditions of the insurance contract?

- 11.1. Definite restriction/exclusion
- 11.2. Temporary restriction / exclusion

12. Only to be answered if vet fees cover requested:

any findings are likely to cause a vet fees claim in the future? no yes
if yes, which:

Questions to be answered by the policy holder:

- Is the horse healthy?
- Did the horse have any treatment during the past 6 months? no yes
If yes, details:

Additional examination if necessary and agreed by the client

- | | | |
|------------------------------------|--------------------------|---------------------------|
| - X-ray of navicular bone (3 each) | <input type="radio"/> no | <input type="radio"/> yes |
| - Fetlock joints (1 each) | <input type="radio"/> no | <input type="radio"/> yes |
| - Jump joints (3 each) | <input type="radio"/> no | <input type="radio"/> yes |
| - Knee joints (1 each) | <input type="radio"/> no | <input type="radio"/> yes |
| - Dorne (1) ? | <input type="radio"/> no | <input type="radio"/> yes |

Remarks / comments

1. General condition

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2. Locomotor system

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3. Heart / Circulation and respiratory organs

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4. Other organs

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5. Breeding mares

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Special conditions:

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City and Date

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Stamp and signature of veterinary

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