

CERTIFICATE OF VETERINARY EXAMINATION OF A HORSE PRIOR TO PRESENTATION FOR BREED SOCIETY GRADING

The notes A to D appear on page 2 of this certificate

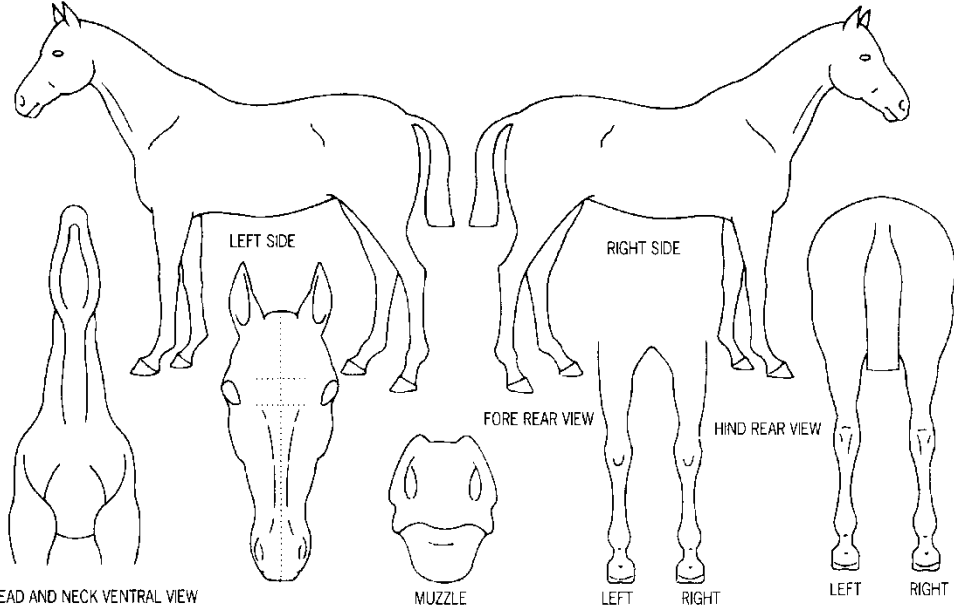
THIS IS TO CERTIFY THAT AT THE REQUEST OF:

Name & Address:

At: (Place of examination) On: (Date & Time)

I have carried out a **TWO-STAGE** / **FIVE-STAGE** examination for BREED SOCIETY GRADING PURPOSES on the animal described below:

DESCRIPTION OF THE HORSE (See Note A)

NAME of horse (or breeding)	
BREED or TYPE	
COLOUR	
SEX	
AGE by documentation: (See Note B)	
Dentition consistent with an APPROXIMATE AGE or AGE RANGE of: (See Note B)	

Head:

Neck:

Limbs: LF: _____
 RF: _____
 LH: _____
 RH: _____

Body:

Acquired Marks: _____ Freeze Marks/Brands: _____

Passport Number(s): _____ Microchip Serial Number: _____

STAGES OF THE EXAMINATION (See Note C)

I omitted stage(s) _____ of the standard procedure because _____

ADDITIONAL PROCEDURES (See Note D)

The following specialised diagnostic techniques were undertaken:

Report appended on the findings of additional procedures **YES** / **NO**

BLOOD SAMPLE FOR MEDICATION ANALYSIS

A blood sample **WAS** / **WAS NOT** taken from the horse during the examination (usually only at the specific request of the Breed Society)

DECLARATION OF PRIOR KNOWLEDGE OF THIS HORSE'S CLINICAL HISTORY

To the best of my knowledge and belief, the practice **HAS** / **HAS NOT** provided veterinary care for this horse under the current ownership.

If the horse **has** previously been so attended, all clinical history, under the current ownership, should be attached to this certificate.

The clinical history for this horse **HAS** / **HAS NOT** been attached to this certificate.

Total number of pages of attached clinical history:

REPORT OF CLINICAL FINDINGS

[Empty space for clinical findings]

Report continued on attached sheet **YES** / **NO**

EXAMINING VETERINARY SURGEON

Veterinary Surgeon's Signature: _____ Date of Signature: _____

Veterinary Surgeon's Name: _____

Address: _____

NOTES ON THE EXAMINATION

This clinical examination was carried out substantially in accordance with the standard procedure recommended by the "British Equine Veterinary Association (BEVA) / Royal College of Veterinary Surgeons (RCVS) Guidance Notes on the Examination of a Horse on Behalf of a Prospective Purchaser (amended 2012)". At the request of the Breed Society, the examination usually comprises either the first two stages or all five stages of the standard procedure, although the exact sequence of the various tests within the examination may vary.

IN NO CIRCUMSTANCES SHOULD THIS CERTIFICATE BE RELIED UPON AS ANY INDICATION OF SUITABILITY OF A HORSE FOR SALE OR PURCHASE.

NOTES FOR THE BREED SOCIETY

(A) IDENTIFICATION AND LEGAL OWNERSHIP

This certificate serves to identify the horse that was examined, but it is not the responsibility of the examining veterinary surgeon to ascertain that the declared seller has legal title in the horse.

(B) AGE

Without appropriate paper records from foal-hood it is not possible to confirm the age of a horse with accuracy. Estimates of age based on a dental examination are imprecise and unreliable and any age range shown on the certificate is approximate and based on opinion only. In the absence of documentary evidence, the term 'aged' may be used to refer to a horse considered after examination to be over 15 years of age.

(C) STAGES OF THE EXAMINATION

If any parts of the examination were omitted for any reason (see "Notes on the Examination" above), the incomplete examination will not have identified any clinical signs of disease, injury or abnormality that could only have been revealed by a part of the standard procedure that was omitted.

(D) ADDITIONAL PROCEDURES

The original records of any additional procedures carried out at the request of the Breed Society (such as radiographs, ultrasonograms & photographs), as well as the blood sample taken for medication analysis, are and remain the property of the examining veterinary surgeon.



The Registrar, New Close Farm, Calf Fallow Lane, Norton, Stockton on Tees. TS20 1PQ

Email: mhcgbr Registrar@gmail.com

Veterinary Measurement Certificate.

Name of horse:

Ulen:

Microchip number:

Measurement:.....inches (to last mane hairs)

Veterinary Signature:

Date:

.....

Veterinary Stamp:

.....

Practice Name:

.....

Practice Address:

.....

.....

Postcode:

.....

Notes: Ensure the horse is stood square, and in a natural stance, not spread or stretched by the handler. Measurement is taken at the last hairs of the mane to the floor in inches