Den Danske Dyrlægeforening

On	hohali	of.	Owner
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viairi uata				
Name Kiss n'Fly		Race traver	Color brun	Sex Mare
Birthday 12-06-2021	Reg	No. 75200211S213587	Chip 208210000740342 No.	
The identity and markings of the horse are in agreement with its passport: Horse is chipped:				
The horse is being purchased for (usage): T	rav			
For how long has the horse been continuously trained/ridden, previously to the pre-purchase exam?: No				
Seller is registered as a client with the practi	ice of	the veterinary surgeon performing the	pre-purchase exam ? Yes	s
With reference to the conditions and limitations of the pre-purchase examination specified in the advance agreement, my conclusions as the examining veterinary surgeon on the day of the examination are as follows From a veterinary point of view, there is a standard risk that the health status of the horse as of this date will influence the proposed usage of the horse. Ref. Point				
From a veterinary point of view, there is a mildly increased risk that the health status of the horse as of this date will nfluence the proposed usage of the horse. Ref. Point				
From a veterinary point of view, there is a moderately increased risk that the health status of the horse as of this date will nfluence the proposed usage of the horse. Ref. Point				
From a veterinary point of view, there is a	a cons	siderably increased risk that the health	status of the horse as of	this date will

Without further supplementary examinations, it remains im possible to draw any conclusions from the performed



21-07-2022

Date

influence the proposed usage of the horse. Ref. Point

examination. Ref. Point

Signature

1. USE OF STANDARD PROJECTIONS OF THE LIMBS USE OF STANDARD PROJECTIONS OF THE LIMBS 1a Hoof and fetlock, front legs and hind legs Lateromedial (LM) LF: No Yes RF: No Yes RH: No Yes 1b Hoof and fetlock front legs Dorsopalmar (DP) LF: No Yes RF: No Yes 1c Tarsus Lateromedial (LM) LH: No Yes RH: No 1d Tarsus Plantarolateral (PILDMO) LH: No RH: No 1e Tarsus Dorsolateral (DLPIMO) LH: No Yes 1f Stifle caudolateral (CaLCrMO) RH: No Yes 2. USE OF ADDITIONEL PROJECTIONS OF THE LIMBS 2 USE OF ADDITIONEL PROJECTIONS OF THE LIMBS 2a Hoof and fetlock, front legs and hind legs 2b Navicular bone (Projections recommended without shoes) No Yes 2c Tarsus No Yes 2d Stifle No Yes

3. 1	NECK PROJECTIONS	
3a	Laterolateralt (LL)	No Yes
4. [DORSAL SPINOUS PROCESSES	
4a	Laterolateral (LL)	No ✓ Yes
5. (OTHER PROJECTIONS	
5a	Other projektions	No ☐ Yes ✔
5b	If yes - wich Carpus Both front feet (L/M, D/P, DLPMO, DMPLO):	
6. H	Hoof	
6b	Are there remodelling or exostosis on the dorsal part of the pastern or the fetlock?	LF: No Yes RF: No Yes LH: No Yes RH: No Yes
6c	Is there ossification of the hoof cartilage?	LF: No Yes RF: No Yes
6d	Is there any remodelling around the navicular bone?	LF: No Yes RF: No Yes RH: No Yes RH: No Yes
6e	Is there any deviation of the position of the pedal bone in the hoof capsule?	LF: No Yes RF: No Yes LH: No Yes RH: No Yes

		LF: No Yes
		RF: No Yes
		LH: No Yes
		RH: No Yes
6g	Other comments:	
8.	Proximal phalanx front leg and hind leg	
8a	Are there OCD fragments on the sagittal ridge?	
		LF: No Yes
		RF: No Yes
		LH: No Yes
		RH: No Yes
8b	Are there OC-contour changes on the sagittal ridge?	
		LF: No Yes
		RF: No Yes
		LH: No Yes
		RH: No Yes
8c	Are there any other fragments dorsodistal or dorsoproximal?	
		LF: No Yes
		RF: No Yes
		LH: No Yes
04	Assistant and a second legator OCD as unconited a classical sector are considered.	RH: No Yes
8d	Are there any palmar/plantar OCD or ununited palmar/plantar process (UPE)?	LF: No Yes
		RF: No Yes
		LH: No Yes
		RH: No Yes
8e	Is there a fracture of the proximal sesamoid bone?	RH: NO 🖭 Yes 🗀
		LF: No Yes
		RF: No Yes
		LH: No Yes
		RH: No Yes
8f	Is there any remodelling on or around the proximal sesamoid bone?	
		LF: No Yes
		RF: No Yes
		LH: No Yes
		PH: No V Vos

	Are there any exostosis palmar/plantar on the proximal phalanx	
		LF: No Yes
		RF: No Yes
		LH: No Yes
		RH: No Yes
8h	Are there any cysts in the proximal phalanx or the distal part of the	_
	metacarpal/metatarsal bone?	LF: No Yes
		RF: No Yes
		RF: No Yes L
8i	Other comments:	RH: No Yes
0.	Suspected very small soft tissue mineralisation RF caudodistal to sesamoid bones fetlock re	gion. (Not dirt in hair/horse
	cleaned repeatedly)	
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9. T	arsus	
9a	Are there OC fragments on the distal intermediate ridge, lateral trochlea or medial malleolus?	
		LH: No Yes
		RH: No Yes
9b	Are there OC- contour changes on the distal intermediate ridge, lateral trochlea or the medial malleolous?	
		LH: No Yes
		RH: No Yes
9c	Is there an entheseophyte dorsoproximally on the third metatarsal bone?	
		LH: No Yes
		RH: No Yes
9d	Are there remodelling or osteolysis in or around the tarsal bones?	
		LH: No Yes
		RH: No Yes
9e	Are there wedge shaped tarsal bones?	
		LH: No Yes
Of		RH: No Yes
9f	Are there fragments plantar in the tibiotarsal joint?	LH: No Yes
9g	Are there osteolysis in/or remodelling around sustentaculum tali?	RH: No Yes
~ 9	Are there osteorysis involvening around sustentactifull tall?	LH: No Yes
9h	Other comments:	RH: No Yes

10.	10. Stifle				
10a	Are there OCD fragments on the lateral troclea?				
		LH: No Yes			
		RH: No Yes			
10b	Are there OC-contour changes on the laterale trochlea?				
		LH: No Yes			
		RH: No Yes			
10c	Are there remodelling/fragments distal on patella?				
		LH: No Yes			
		RH: No Yes			
10d	Are there fragments or calcifications caudal in the femerotibial joint?				
		LH: No Yes			
		RH: No Yes			
10e	Is there remodelling cranial to the intercondylar process?				
		LH: No Yes			
		RH: No Yes			
10f	Are there cysts distal in femur or proximal in tibia?				
		LH: No Yes			
		RH: No Yes			
10g	Other comments:				
13.	Andre projektioner				
13a	Describe findings				
14.	Other				
14a	Other findings				
		No Yes Yes			