



VALLEY EQUINE VET CENTRE

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ABN 90 159 300 802

15th November 2017

Pre-sale Examination

This report is only relevant as at the time and date the horse was inspected

To Whom It May Concern

This is to certify that the horse described below was examined at the Noblewood Stud Farm, Gidgegannup, on the 15th November 2017 at the request of Ms Robyn McTaggart.

The horse was subjected to a comprehensive clinical veterinary insurance examination along the guidelines as advocated by the Equine Veterinarians Australia.

Veterinary Declaration – This vendor not a regular client of this practice. This horse is unknown to the practice.

Intended Use of the Horse

Training and competition as a dressage/jumping/showing horse. Experienced rider.

Description of the Horse Presented For Examination.

Horses Name	Calibre
Dam/Sire	I-Corrina/Cassini I
Breed	Warmblood
Date of Birth/Age	18/3/2009
Sex	Male (stallion)
Colour	Grey
Left Shoulder Brand	Unreadable/None evident
Right Shoulder Brand	Unreadable/None evident
Left Flank Brand	Holsteiner Crown
Markings	fleshmark upper lip
Microchip	982000167684410
Height	Not measured accurately. This remains the responsibility of the purchaser. Approx 16.2 HH

Performance Record

This horse is an experienced riding/show horse and now is a breeding sire.

(As we do not have access to the official records we would suggest that this is checked and verified with the appropriate organisation(s))

Work/Training Status

The horse was reported to NOT be in full/any work at the time of examination.

(PLEASE NOTE - Examinations done on horses not in full work are much less reliable)

Conformation

There were no serious conformational defects/abnormalities of both forelimbs and hindlimbs.

The horse appeared to travel, in gait, freely without brushing or hitting at the time of examination.

The horse tends to have a base narrow forelimb stance and stands close behind with mild outward deviation of the hind toes. Mildly offset carpi bilaterally. Bilateral toe in stance in front limbs.

Feet

The horse had unhealthy feet. The horse was in front feet only. The front hooves were normal in shape and size. Multiple wall cracks in all feet, extending from coronary band, medially and laterally, some bleeding – see pics. Increased digital pulse LH.

There was no reaction to hoof tester pressure over the heels, soles and bars of the hooves.

Nervous System

The horse was inspected at the walk and trot on a straight line (flat firm concrete surface) and at the same gaits on the left and right circle lunge on a 15 meter diameter circle.

The horse was also turned in tight spinning circle in both directions and also asked to rein back.

There were no obvious abnormalities of the central or peripheral nervous systems. This included and assessment of the demeanour, cranial nerve reflexes, placement reflexes, tail tone, tail sway, overall proprioception, brachial and lumbar-sacral reflexes. No evidence of digital neurectomy.

This horse is athletic and balanced in its gait.

Musculo-Skeletal Examination

The knees, fetlocks, pasterns, cannon bones, tendons, suspensory ligaments, stifles, hocks, cervical, thoracic, lumbar and sacro-iliac spine - all appeared to be mostly normal on visual (gross examination) and manual palpation examination.

In my professional opinion, there was no evidence of lameness when the horse was walked and trotted in a straight line.

There was evidence of lameness (1/5 LH) during trotting in small and large circles on the lunge (in both a counter clockwise or clockwise direction, on hard compacted surface).

The horse was also trotted and cantered on the circle/lunge on a softer lunge yard sand surface and worked at speed – lameness was detected on the lunge (2/5 LH) in a circle in both directions. The horse was not examined under saddle/whilst being ridden. This horse was well lunged trained.

Flexion Testing Results

- There was no synovial swelling/distension of the lower fore joints – carpi and fetlocks.
 - There was no synovial swelling or distension of the hindlimb joints.
 - The ligaments and tendons of hind limb joints appeared grossly normal and palpably normal.
 - The ligaments and tendons of foreleg limb joints appeared grossly normal and palpably normal.
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- **The horse did not react significantly to flexion testing of the Right and Left foreleg fetlock/pastern joints.**
 - **The horse did not react significantly to flexion testing of the Right hind leg hock (spavin) and fetlock/pastern joints.**
 - **The horse did not react significantly with pain on passive flexion of the Left and Right foreleg carpi.**
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- **The horse did react significantly (1/5) to flexion testing of the Left hind leg hock (spavin) and fetlock/pastern joints.**

Comments:

May indicate joint pain.

(Flexion tests are subjective and interpretation can be variable between examiners – the horse was subjected to the clinic standard flexion testing protocol and benchmarked against our own standards)

Ultrasonography

This was not performed.

Radiographic Examination

Routine digital radiography was performed with sedation. Foot cleaned, packed and horse positioned on 3cm block. Atomscope FFD 70cm. Eklin.

Views Taken

Right and Left Forelimb

Hoof (lateral, dorsopalmar)
Fetlock (lateral, dorsopalmar, oblique by 2)
Pedal bone/hoof (60 degree dp)
Carpus (lateral, dorsopalmar, oblique by 2)

Right and Left Hindlimb

Hock (lateral, dorsopalmar/obliques)
Fetlock (lateral, dorsoplantar)
Stifles (lateral, craniocaudal, obliques)

- **LF carpus - radiocarpal bone cyst, unlikely clinical significance??**
- **RH hock - DIRT OCD lesion, unlikely clinically significant (rounded, old)**
- **LH hock - apparent 8x12mm round radio opacity distal tibia, possible artefact**
- **RH fetlock - 2mm circular lucency in medial sesamoid Bilateral fore feet - abaxial hoof wall cracks, thick sole, long toes, mediolateral imbalance (RF only), thickened coronary band**
- **Summary; some lesions of questionable significance**

Integument (Skin)

The body skin and coat hair were healthy and without significant blemish.

Condition and General Health

At the time of examination, the horse was considered to be well nourished. The horse was reported to have a good appetite, normal faeces and urine.

The horse had an excellent temperament and there was no evidence of any vices. (windsucking, weaving, kicking, rearing). The owner, did state that this horse did not windsuck or wear any windsucking prevention devices, and did not exhibit any other vices like weaving, stall wetting (psychogenic polydipsia), rearing, bucking or bolting.

The horse had an excellent temperament and was very amenable during the examination.

Rectal Temperature 37.9

Body Score 3.5/5

Cardio-Thoracic/Respiratory

There were no arrhythmias, murmurs or dropped beats. Auscultation of the lung fields was normal. Heart rate (resting) was 44 beats per minute. Respiratory rate – 14 breaths/min. Mucous membrane colour – pink. Jugular veins appeared normal. Mucus membrane pink, refill <1 sec.

Palpably normal larynx, percussion of sinuses, no abnormal breath sounds.

Endoscopic Examination

This was not performed. No abnormal respiratory noises heard throughout the examination.

ECG

This was not performed.

Eyes/Ears

The eyes appeared normal. This included an assessment of the blink, menace and pupillary reflexes. The cornea and pupil were normal and the eyelids were intact. There was no evidence of blindness or vision impairment. Ophthalmic examination was undertaken without the use of pupil dilatory medications which limited the examination of the retina and lens. Further ophthalmic examination by a specialist maybe needed for full assessment of the deeper eye structures.

This horse appeared to have normal ears and hearing.

Gastro-Intestinal

There were no obvious abnormalities of the gastro-intestinal tract and an examination of the horses' teeth confirmed its approximate age. The horse appeared to masticate normally. Normal bite, no evidence of cribbing, normal tongue/gums, palate, no wolf teeth evident.

There are limitations to the examination of the mouth in this horse; oral examination by a veterinary dental surgeon/specialist is recommended.

Palpation of ventral abdomen – no evidence of abdominal surgical incisional scar.

Reproductive Tract

A complete examination of the reproductive tract was not done but the external genitalia appeared normal. Breeding history unknown.

The owner did state that, to the best of their knowledge, this horse has not had any injectable, inhalant, topical or oral medication within the last 30 days.

It should be noted that on the advice of the **Equine Veterinarians Australia, the British Equine Veterinary Association and the American Association of Equine Practitioners**, no judgment is made about this horse's soundness, suitability for purchase/sale or otherwise. In this report there is neither determination nor opinion as to the suitability of the animal for the intended use. This issue is a business judgment that is solely the responsibility of the purchaser that he or she should make on the basis of a variety of factors, only one of which is information contained within this report.

Further, it is my professional opinion, that there is no reason that any insurer or underwriter should not accept this horse for mortality insurance coverage.

I hereby certify that to the best of my knowledge the above report is a true and accurate record of the findings of the examination done on this horse on this day.



Dr Warwick Vale
BSc BVMS (HonsII)
FEI Veterinary Delegate











Biography

Dr. Warwick Vale

Nationality Australian

Residing in Perth, WA

Age 51, Married, with two children

FEI Veterinary Delegate #428.

Have been a FEI Veterinary Delegate for over 22 years.

In this time;

- I have successfully completed 3 FEI Veterinary Accreditation and Training Courses.
- I have officiated at over 30 FEI events, in CSI, CDI, CCI and CIC events.
- I have officiated at over 30 other EFA/Endurance events, National Championships etc as a treating veterinarian and/or Associate Veterinary Delegate.
- I have officiated at the Sydney 2000 Olympic Games and the 2006 World Cup Show Jumping Final in Malaysia as the FEI Medication Control Program Supervisor. I was a Senior Technical Official.
- In Feb 2008, I won the EFA National - Sports Official of the Year
- I was the appointed FEI MCP Testing Veterinarian (ITO) for the 2008 Beijing (Hong Kong) Equestrian Olympics.
- FEI Vet Delegate 2011 SEA Games Indonesia.

I have chaired the Western Australia Branch of the Equestrian Federation of Australia (EFA) for 4 years, and was Vice Chairman of EWA Branch for 2 years, in the years from 1996 – 2002.

I have been a member of the National EA Board from 1999 – 2002. Past Equestrian Australia Chairman 2013 – 2015.

I have chaired the Medication Control Panel of the EFA (WA) for over 9 years and conducted medication control at over 60 competitions.

I have been a member of the Australian Horse Industry Council (WA) committee.

I am a past President of the Australian Equine Veterinary Association with a portfolio on the executive board. I am an Australian Veterinary Association Member.

I am a practicing equine veterinary practitioner, practice owner, with a special interest in competition horses. Graduated in 1989 from Murdoch Uni Vet School with Honours.

I am a partner of the Valley Equine Veterinary Centre where I have a special interest in equine veterinary medicine, especially sport and competition horses.

I have been a junior EA rider/competitor in years past.