



WESTFALEN  
NORTH AMERICA

**DEUTSCHES REITPONY**  
**STALLION VETERINARY EXAM PROTOCOL**

Stallion's Name : \_\_\_\_\_

Registration Number: \_\_\_\_\_ Microchip: \_\_\_\_\_

DOB: \_\_\_\_\_ Color: \_\_\_\_\_ DNA # \_\_\_\_\_

Markings: \_\_\_\_\_

Owner of Stallion: \_\_\_\_\_

Address: \_\_\_\_\_

**EXAM PROTOCOL**

1. Condition: \_\_\_\_\_

\_\_\_\_\_

2. Skin and Hair Coat: \_\_\_\_\_

\_\_\_\_\_

3. Apparent Scars: \_\_\_\_\_

\_\_\_\_\_

4. Conjunctivitis: \_\_\_\_\_

\_\_\_\_\_

5. Sub Mandible Lymph Nodes: \_\_\_\_\_

\_\_\_\_\_

6. Body Temperature Rectal: \_\_\_\_\_

7. Temperament: \_\_\_\_\_

\_\_\_\_\_

8. Nervous System: \_\_\_\_\_

\_\_\_\_\_

9. Mouth and Bite: \_\_\_\_\_

\_\_\_\_\_

10. Jugular Vein: \_\_\_\_\_

11. Genitalia: \_\_\_\_\_

\_\_\_\_\_

12. Eyes

Right Eye: \_\_\_\_\_

Left Eye: \_\_\_\_\_

13. Auscultate Heart & Resting Rate: \_\_\_\_\_

---

---

14. Airways at Rest

a) Breathing Type: \_\_\_\_\_

b) Spontaneous Coughing: \_\_\_\_\_

c) Induced Coughing: \_\_\_\_\_

d) Nasal Discharge: \_\_\_\_\_

e) Auscultation of Lung Sounds: \_\_\_\_\_

f) Percussion: \_\_\_\_\_

15. Evaluation Movement of Legs and Joints

a) Inspection and Palpation of Joints

Left Fore: \_\_\_\_\_

Right Fore: \_\_\_\_\_

Left Hind: \_\_\_\_\_

Right Hind: \_\_\_\_\_

Hooves and Shoeing: \_\_\_\_\_

b) Evaluation of Walk and Trot Straight Away on Hard Surface: \_\_\_\_\_

---

c) Evidence of Lameness in turns: \_\_\_\_\_

---

d) Flexion Test

Left Fore: \_\_\_\_\_

Right Fore: \_\_\_\_\_

Left Hind: \_\_\_\_\_

Right Hind: \_\_\_\_\_

Resistance to Flexion: \_\_\_\_\_

## 16. Stress Exam

a) Abnormalities in Movement During and After Exercise: \_\_\_\_\_

---

b) Coughing and Nasal Discharge: \_\_\_\_\_

c) Respiratory Sounds: \_\_\_\_\_

d) Auscultation of Heart and Lung after Exercise: \_\_\_\_\_

---

e) Pulse and Respiratory Rate after 15 minutes of exercise

	Immediately After Exercise	After 10 Minutes	After 20 Minutes
Pulse			
Respiration			

18. Additional Exams: \_\_\_\_\_

---

---

---

---

---

---

---

---

With regards to the further use of this horse as a riding horse/breeding stallion of the present time there are:

Concerns

No Concerns

Comments:

---

---

---

---

---

\_\_\_\_\_  
Date

\_\_\_\_\_  
Veterinarian's Signature

\_\_\_\_\_  
Veterinarian's Printed Name

\_\_\_\_\_  
Veterinarian's Address and Phone Number



WESTFALEN  
NORTH AMERICA

**List of impairments of health for Deutsches Reitpony stallions**

<b>Hereditary defect</b>	<b>Inspection/examination</b>	<b>Maximal degree of formation</b>
Jaw anomaly	Specialized veterinary inspection	Incisors may not protrude more than 50 % from tooth surface. Deviations of one or more tooth/teeth, i.e. askew/crooked teeth count as criterion for exclusion.
Cryptorchidism	Specialized veterinary inspection	Both testicles should be equal and normal sized in form, rigidity/strength and size and entirely descended in the scrotum.
Hemiplegia laryngeal	Stallions with inspiratory breathing sound: Specialized veterinary inspection	Paralysis of larynx

It is herewith specialized veterinary confirmed that the stallion

Name: \_\_\_\_\_

Equine Life Number: \_\_\_\_\_

fulfills the principles of the Deutsches Reitpony pursuant to the list above.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of equine veterinarian*

*Stamp*