

GREAT AMERICAN INSURANCE EQUINE OPERATIONS

LOSS OF USE RENEWAL EXAMINATION

GENERAL AND CLINICAL EXAM:

	normal	any abnormal findings
Body Condition:	_____	_____
Eyes:	_____	_____
Palpation of Back:	_____	_____
Examination for lameness at a walk and trot in a straight line and small circles in both directions on a hard surface:	_____	_____
Inspection of Stifles:	_____	_____

Fixation of the patella: L not possible___ possible___
 R not possible___ possible___

	Flexion Tests		Palpation of Limbs Normal?		Response to Hoof Testers Normal?	
	neg.	pos.	yes	no	yes	no
Left forelimb	_____	_____	_____	_____	_____	_____
Right forelimb	_____	_____	_____	_____	_____	_____
Left hindlimb	_____	_____	_____	_____	_____	_____
Right hindlimb	_____	_____	_____	_____	_____	_____

Comment on positive flexions or abnormal findings:

Is this animal currently receiving any performance enhancing therapy or medications?:

Are you aware of any injury, unsoundness or disease this horse has been treated for in the past year?

Are you the regular attending vet? _____

Signature of Veterinarian

Date of Exam

Address

Phone Number