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Buyer Information

Pre-Purchase Examination Buyer Request

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No	mar	TC.	orm Nomo					
	me:ldress:							
	ty: State:							
	one: Cell							
Wi	Will you be present for this exam? ☐ Yes ☐ No If no, please name the agent acting on your behalf							
Ho	orse Identification							
Re	gistered Name:		Registration Number:					
	rn Name:		-					
	rthdate / Age:		_					
	Sex: Stallion							
Markings:								
Color: Head/Face:								
Brands/Scars:								
Left Front: Right Front:								
Left Rear: Right Rear:								
1)	What is the intended use of this horse? □Pleasure/Trail □Breeding Would you like to request an insurance ex If yes, please bring copies of the	□Competition	on (list discipline): Request					
3)	The pre-purchase examination includes a comprehensive physical exam. Would you like to request any of the following additional exams and diagnostics? A. Coggin's Test (equine infectious anemia): (Required unless current test within 10 days.)							
	B. Certificate of Veterinary Inspection: (C. Complete Blood Count: (To monitor	-		□Request □Decline □Request □ Decline				
	D. Serum Chemistry Panel: (To monitor l		,	Request Decline				

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E. Fecal Exam: (To n	□Request □	Decline		
F. Pre-purchase Toxic	cology Screening:(a complete drug sc	creening list available upon requ	uest)□Request □	Decline
G. Reproductive Ultra	asound: (To check ovaries, uterus and	d pregnancy.)	□Request □	Decline
•	: (To check for abnormalities in hear	t function.)	\square Request \square	Decline
I. Radiographs:				
i.	Front Feet (Navicular Series) R	lequest Decline		
ii.	Hocks (4 views each) ☐Request	□ Decline		
iii.	Other:	_ □Request □Decline		
Please list any other speci	fic requests below:			
warrantee. Examination i and recommendations of t examination. To avoid the	is intended as an aid to assist a prosp is undertaken at the expense of and fo the examiner are made in his/her opin the stigma of the term "unsound," conc ons" for the intended use only.	or the exclusive use of the buyer nion and to the best of his/her kn	r. All comments, fi nowledge at the tim	ndings, ne of the
examination. Recurrent c impaired vision, anhidros EPM or cervical facet arth examinations. If the buye	ical or musculoskeletal problems are colics, "tying up," low grade bronchitists, subclinical Cushing's syndrome, such as an about lameness are some or or the buyer's representative has ricky of the above conditions can be reco	is, exercised induced pulmonary subclinical Lyme disease, early of the occasional conditions un- dden the horse in the discipline	y hemorrhage, preg neurological diseas diagnosed on routir	nancy, se such as
I request that the above de of this examination.	escribed horse be examined for purcha	ase. Examination procedures n	ot checked are wait	ved as part
Printed Name of Buyer	Signature of Buyer	Date		