Thehorsebay

EQUINE INSPECTION FORM

Clients Name _____ Date _____ Phone _____

Clinic Name _____ Clinic Address _____

Cinic Phone _____ Vets Name _____

Horse Name _____ Breed _____ Sex _____ Color _____

Findings (E) Excellent (G) Good (F) Fair (P) Poor

General attitude and demeanor:
☐ Bright, alert, responsive ☐ Quiet, alert, responsive ☐ Lethargic ☐ Mildly depressed ☐ Depressed
*Comments*_____

Appetite: ☐ Normal ☐ More than normal ☐ Less than normal ☐ Not eating
*Comments*_____

Body Condition (1-9) _____ **Skin and Coat** E G F P **Mane and Tail** E G F P
*Comments*_____

Movement: (*Normal, lame, wobbly, weak*) LF _____ RF _____ LH _____ RH _____
*Comments*_____

Head, face, throat looks and feels: *From front* ☐ Normal ☐ Abnormal *From sides* ☐ Normal ☐ Abnormal
Left eye: ☐ Normal ☐ Red ☐ Cloudy ☐ Watering ☐ Squinting ☐ Growth
Right eye: ☐ Normal ☐ Red ☐ Cloudy ☐ Watering ☐ Squinting ☐ Growth
*Comments*_____

Temperature _____ **Pulse** _____ **Respiration** _____ **Capillary refill time** _____

Mucous membranes ☐ Pink ☐ Pale pink ☐ Red ☐ Dark ☐ Toxic line

Pulse feels: ☐ Normal ☐ Weak ☐ Irregular **Heart sounds:** ☐ Normal ☐ Weak ☐ Irregular

Respiratory sounds: ☐ Normal ☐ Abnormal *Comments* _____

Gut Sounds: 0 absent, 1 fewer than normal, 2 normal, 3 more than normal Upper left side _____ Lower left side _____
Upper right side _____ Lower right side _____

Feet: Heat 0-5/**Digital Pulse** 0-5 LF ___/___ RF ___/___ LH ___/___ RH ___/___

Limbs look and feel: ☐ Normal ☐ Abnormal LF _____ RF _____ LH _____ RH _____

Body, neck, and back look and feel: ☐ Normal ☐ Abnormal _____

Under belly looks and feels: ☐ Normal ☐ Abnormal_____

Tail and under tail look and feel: ☐ Normal ☐ Abnormal _____

Sheath or udder looks and feels: ☐ Normal ☐ Abnormal_____

Other notes _____

Signature _____