

Dear Doctors

Stallion selection is an important step in the management and sustainability of our studbook. The quality of tomorrow's foals depends on rigorous selection.

Veterinary expertise, the first stage in our selection process, is certainly one of the most important steps.

We therefore ask you to complete the entire protocol accurately.

Once completed, the protocols will be evaluated by of *Faculté Vétérinaire de Liège*, and we are confident that we can count on the accuracy and professionalism of our veterinary practitioners.

The practitioner accepts professional responsibility for the contents of this report.

The SBS studbook is at your disposal should you have any questions or require further clarification.

Yours sincerely

The SBS Studbook

GLOBAL VIEW OF VETERINARY PROTOCOL

PART 1 : IDENTIFICATION, GENERAL EXAM

- Identification of the horse :** verification of chipnumber, UELN and the graphic and written description in the passport of the horse.
- General examination including :**
 - Exam of the mouth (overjet/overbite) and the reproductive organs (cryptorchidy)
 - Auscultation of lungs & heart (in case of abnormality: electrocardiogram / echocardiogram)

PART 2 : CLINICAL EXAMINATION OF THE LOCOMOTOR SYSTEM

- Exam at rest (inspection and palpation)
- Exam in movement: the horse is presented at walk and trot on a straight line and on circle to the left and right both on both a deformable and firm surface. Flexion tests are optional.

PART 3 : RADIOGRAPHIC EXAM

X-rays and quality criteria of radiographic views for assessment of the osteoarticular status of SBS-candidate sires

Identification of radiographs

All radiographs should be labelled with :

- Name of the horse
- Family name of the owner
- Breed, sex and age of the horse
- Date of the radiographic examination

Right and Left limb should be clearly identified on radiographs with letters (R or D for right, L or G for left). Letters should not be superimposed to the radiographic image and should be positioned laterally on the DP view of the foot.

Radiographic views requested

Total : 20 views

Front feet : 4 views (LM and "Oxspring" views (D60°Pr-PaD)

Front and hind fetlocks : 4 views (LM)

Hocks : 8 views (LM, PI45°L-DM, D30°L-PIM, PID)

Stifle : 4 views (LM, CdL-Crm)

Front feet

- Lateromedial view
- DPr-PaDi ("Oxpring" or "upright pedal")

Quality criteria

- No shoe should be present on the foot
- The sulci of the frog should be filled with a soft tissue opacity material
- Proximal interphalangeal joint should be included in both views
- Both views should be taken separately from fetlock views (centering should be on the foot)
- If possible, LM view should be taken on the weight bearing foot
- Medial and lateral condyle of P2 should be perfectly superimposed on the LM view (2 mm between the medial

and lateral con-dyle of P2 are tolerated)

- The DPr-PaDi view should be exposed for the navicular bone, P3 should be visible

Front and hind fetlocks

- Lateromedial view

Quality criteria

- Medial and lateral side of the metacarpal/tarsal condyle should be perfectly or almost perfectly superimposed
- The dorsal profile of the sagittal ridge should be visible dorsal to each condyle profile if the LM is not perfect
- Visualization of the palmar/plantar sesamoidophalangeal space should be good. Oblique views will be taken if visualization is dif-ficult and there is a doubt about the presence of a palmar/plantar fragment
- Proximal interphalangeal joint should be included in the LM view of the hind fetlock

Hocks

- Lateromedial view

Quality criteria

- The x-ray beam should be oriented to make the intertarsal and tarsometatarsal joint space perfectly visible on the LM view
- Lateral and medial ridges of the talus should be perfectly superimposed on the LM view (a distance of few mm between the 2 ridges is tolerated if the intertarsal and tarsometatarsal spaces are well visible)
- The proximal extremity of the metatarsus should be visible on the LM view of the hock
- The axial aspect of the medial malleolus and the inter-tarsal spaces should be clearly delineated on the D30°L-PIM oblique view

Stifles

- Lateromedial view
- Caudolateral-craniomedial

Quality criteria

- The femoral condyles should be superimposed on the LM view (a distance offew mm to 1.5 cm between the 2 condyles is toler-ated)
- The femoral trochlear ridges should be entirely visible on both views
- The cranial profile of the lateral trochlear ridge should not be superimposed to the outline of the trochlear groove on the LM view
- Exposure of both views should be sufficient to perfectly detect any abnormality within the femoral condyles

WARNINGS :

Only DICOM format X-ray will be accepted.

Please note, when sending the veterinary protocol to the SBS studbok, the x-rays must have been taken within a maximum of 6 months.

VETERINARY PROTOCOL

EXAMINATION REPORT

HORSE

Name of Horse : Chip number :

Studbook : UELN :

Date of birth : Color :

Vaccine protection Influenza Herpes

Attention, horses must be vaccinated against influenza and herpes virus for the Selection Show

OWNER(S)

INVOICING DETAILS

Company :

First Name : Last Name :

Street : N° :

Country : P.C. : Town :

Tel. : Mobile :

E-mail : VAT :

VETERINARY

First Name : Last Name :

Street : N° :

Country : P.C. : Town :

Mobile : E-mail :

PROTOCOL TO BY SEND TO SBS COMPLETED AND SIGNED

CLINICAL EXAMINATION OF THE HORSE

Veterinarian certifies that he has verified the horse's identity.

EXAMINATION

A. Grooming and state of nutrition	<input type="checkbox"/> No remarks	Remarks :
B. Skin and scars (e.g. scars from surgery)	<input type="checkbox"/> No remarks	Remarks :
C. Examen of the mouth (overjet/overbite)	<input type="checkbox"/> No remarks	Remarks :
D. Ocular examination	<input type="checkbox"/> No remarks	Remarks :
E. Spontaneous coughing	<input type="checkbox"/> Not present	<input type="checkbox"/> Present
F. Auscultation of lungs	<input type="checkbox"/> No remarks	Remarks :
G. Auscultation of heart	<input type="checkbox"/> No remarks	Remarks :
H. Reproductive organs examination	<input type="checkbox"/> No remarks	Remarks :
Left testis (cryptorchid, size and consistence)	<input type="checkbox"/> No remarks	Remarks :
Right testis (cryptorchid, size and consistence)	<input type="checkbox"/> No remarks	Remarks :
I. Remarks		

VETERINARY PROTOCOL

CLINICAL EXAMINATION OF THE LOCOMOTOR SYSTEM

A. Inspection and palpation of front limbs	<input type="checkbox"/> No remarks	Remarks :
B. Inspection and palpation of hind limbs	<input type="checkbox"/> No remarks	Remarks :
C. Posture of front limbs)	<input type="checkbox"/> No remarks	Remarks :
D. Posture of hind limbs	<input type="checkbox"/> No remarks	Remarks :
E. Examination of walk and trot in hand straight forward, on hard ground	<input type="checkbox"/> No remarks	Remarks :
F. Trot in a circle on soft and hard ground on both reins	<input type="checkbox"/> No remarks	Remarks :
G. Tight turns	<input type="checkbox"/> No remarks	Remarks :
H. Neurological disturbances : Signs of ataxic movements	<input type="checkbox"/> Not present	<input type="checkbox"/> Present
I. Auscultation of lungs and heart after exercises	<input type="checkbox"/> No remarks	Remarks :
J. Remarks		

RADIOGRAPHIC EXAM (Attention only DICOM Format)

Radiographic views requested

Total : 20 views

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Stifle : 4 views (LM, CdL-CrM)

Radiographic remarks

Foot RF :

Foot LF :

Fetlock RF :

Fetlock LF :

Fetlock RH :

Fetlock LH :

Hock Right :

Hock Left :

Stifle Right :

Stifle Left :

Remarks :

VETERINARY PROTOCOL

VETERINARY SIGNATURE

I, the undersigned , doctor of veterinary medicine,

declare that I have examined the stallion candidate

belonging to on and that I have completed the

veterinary protocol with accuracy and probity.

The complete protocol will be digitized and sent by me to **sbs@sbsnet.be** together with the X-rays in **DICOM format**.

Done at on

Sincerely and accurately

Stamp and handwritten signature