

## **Pre-Purchase Exam Information**

Please fill out the fol	lowing information prior	to the pre-purchase	exam and fax to 780.669.7035 or
email a pdf file to of	fice@westhillsevs.com		
Buyer:	Address:		
Phone number:		Email:	
Credit Card: MC / V	ISA		Exp
Trainer/Coach:		Seller:	
Horse's Name:	Age:	Breed:	Sex:
What is the intended	use for the horse?		
How long have you l	been acquainted with this	s horse?	
Have you tried this h	norse? Yes No If yes	, in what detail?	
Please indicate what	is important to you in a	horse:	
Appearance:	Not Important	Important	Very Important
Blemishes:	Not Important	Important	Very Important
Performance:	Not Important	Important	Very Important
Temperament:	Not Important	Important	Very Important
Will you be present	for the Pre-purchase exa	mination?	
Any other informatio	on that would be importan	nt for the exam?	

Please indicate any extra tests that will be required during the prepurchase at additional costs:

- □ Radiographs: □ Front Feet □ Hind Feet □ Navicular □ Fetlocks □ Knees □ Hocks □ Stifles
- Endoscopy Upper airways, larynx, guttural pouch
- Ophthalmology Dilate eye lens & retinal exam
- □ Laboratory Testing Equine Blood Screen; CBC & Chemistry
- Fecal Egg Count
- □ NSAID Testing Drug residue for bute or banamine (takes 7-14 business days for results)
- □ Coggins Test Equine Infectious Anemia (takes 3-4 business days for results)
- □ Breeding Evaulation Mare
- □ Hyperkalemic Periodic Paralysis (takes 10-14 business days for results)
- □ I understand that veterinary pre-purchase examinations do not warrant the suitability of the horse for the purchase intended and is expressly limited by my statements and instructions on the depth of the examination desired, the specific tests which I have requested are preformed and the fee I have agreed to pay. \*A complete estimate will be provided after we receive this form\*

Signature \_\_\_\_

\_\_\_\_\_ Date \_

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