



Member: _____ Membership Number: _____

Street: _____ Telephone: _____

City: _____ State: _____ Zip: _____

APPLICATION FOR STALLION LICENSING

Stallion: _____ Date of Birth: _____

Registration Number: _____

Sire: _____

Dam: _____

I am aware that RPSI membership is required to have a stallion license.

Date, Place

Signature

VETERINARY EXAM PROTOCOL

Stallion's Name : _____

Registration Number: _____

Born: _____

Color: _____

Sire: _____

Dam: _____

Owner of Stallion: _____

Address: _____

Telephone: _____

EXAM PROTOCOL

1. Condition: _____

2. Skin and Hair Coat: _____

3. Apparent Scars: _____

4. Conjunctivitis: _____

5. Sub Mandible Lymph Nodes: _____

6. Body Temperature Rectal: _____

7. Temperament: _____

8. Nervous System: _____

9. Mouth and Bite: _____

10. Jugular Vein: _____

11. Genitalia: _____

12. Eyes

Right Eye: _____

Left Eye: _____

13. Auscultate Heart & Resting Rate: _____

14. Airways at Rest

a) Breathing Type: _____

b) Spontaneous Coughing: _____

c) Induced Coughing: _____

d) Nasal Discharge: _____

e) Auscultation of Lung Sounds: _____

f) Percussion: _____

15. Evaluation Movement of Legs and Joints

a) Inspection and Palpation of Joints

Left Fore: _____

Right Fore: _____

Left Hind: _____

Right Hind: _____

Hooves and Shoeing: _____

b) Evaluation of Walk and Trot Straight Away on Hard Surface: _____

c) Evidence of Lameness in turns: _____

d) Flexion Test

Left Fore: _____

Right Fore: _____

Left Hind: _____

Right Hind: _____

Resistance to Flexion: _____

16. Stress Exam

a) Abnormalities in Movement During and After Exercise: _____

b) Coughing and Nasal Discharge: _____

c) Respiratory Sounds: _____

d) Auscultation of Heart and Lung after Exercise: _____

e) Pulse and Respiratory Rate after 15 minutes of exercise

	Immediately After Exercise	After 10 Minutes	After 20 Minutes
Pulse			

Respiration			
-------------	--	--	--

18. Additional Exams: _____

With regards to the further use of this horse as a riding horse/breeding stallion of the present time there are:

Concerns

No Concerns

Date

Veterinarian's Signature