



## YEARLY VETERINARIAN INSPECTION FORM

To be completed in full by the adopter's licensed veterinarian and returned to TRRAC directly from the veterinarian.

**Please return to [trrac@ottbs.org](mailto:trrac@ottbs.org)**

Horses are required to be inspected for weight/body condition and up to date with vaccinations, farrier care, dental and deworming.

### Horse Information:

**Registered Name Of Horse** \_\_\_\_\_

**Tattoo Number** (If readable) \_\_\_\_\_

**Microchip Number** (to be scanned by the veterinarian- microchips are assigned to each horse from our organization and confirm the horse's identity) \_\_\_\_\_

**Sex:** Mare / Gelding / Colt

**Color** \_\_\_\_\_ **Markings** \_\_\_\_\_

### Current Feed Program

Grain Type \_\_\_\_\_ How Much? \_\_\_\_\_

Hay Type \_\_\_\_\_ How Much? \_\_\_\_\_

Other Supplements or Feed \_\_\_\_\_

### Current Body Score of Horse (Based off of Henneke scale)

\_\_\_\_\_

**Any concerning remarks regarding the horse's condition? (Muscle loss, wounds, coat/skin condition)**

\_\_\_\_\_

### Vaccination History Dates

Flu/Rhino \_\_\_\_\_ Botulism \_\_\_\_\_ Rabies \_\_\_\_\_

West Nile \_\_\_\_\_ EWT \_\_\_\_\_

Last Dental Float Date \_\_\_\_\_

Last De-Worming Date \_\_\_\_\_ Type Of Dewormer \_\_\_\_\_

Farrier History (Last Shoeing Date) \_\_\_\_\_ Type Of Shoes \_\_\_\_\_