



Kulshan Veterinary Hospital, PLLC

8880 Benson Road, Lynden, Washington 98264 • 6220 Portal Way, Ferndale, Washington 98248

Phone: (360)354-5095 • Fax: (360)354-3740

www.KulshanVet.com • We.Care@KulshanVet.com

Dear Buyer and Seller:

Here you will find some important information to help all parties navigate through this exciting and, at times, stressful process as smoothly and openly as possible.

STATEMENT FOR PRE-PURCHASE EXAM

A pre-purchase exam is a thorough physical examination stating an opinion of the horse on the day of the exam. The guidelines we follow in doing the examination are current with the standards set by the veterinary profession.

The exam is performed for the buyer and not the seller. The buyer needs to inform the veterinarian of the intended use of the horse and what past history is known. The buyer must also inform us of what radiographs, blood work, or diagnostics are to be performed (see attached options and price lists). PPE procedures and costs can vary depending on what needs to be done and what options the buyer selects. If someone else is acting as an agent for the buyer, he or she should be aware of what diagnostics are to be performed.

When performing a pre-purchase examination, we are asked to give an opinion as to whether a horse has any indications of problems. We cannot predict the future of any horse. Also, horses can develop problems very quickly, even minutes, before the exam and minutes after the exam. Horses are like people in that they have different pain tolerances. Therefore, it is impossible to be certain on any day that no sub-clinical problems exist. It should be understood that the veterinarian does not issue a warranty on any particular case, and if one is desired, this should be contracted with the seller. We are advocates for the buyer, providing the buyer with our best opinion possible from examining the horse on that particular day and moment.

The seller is responsible for producing truthful information regarding the horse and disclosing all veterinary medical records that exist. Seller must realize that all information or diagnostics obtained during the examination and discussions relating to these findings are privileged information between the veterinarian and the purchaser or his or her agent(s). This information can only be made available to the seller with the consent of the buyer.

The horse will not receive a “pass” or “fail.” The decision to buy can only be made by the buyer. Only the buyer is able to decide if the horse’s talent, suitability, disposition, or value meet his/her satisfaction.

Please discuss any questions regarding the exam with us before making any final commitments.

It is mandatory for all buyer and seller forms to be completed and returned to our office 24 hours prior to the appointment, or the appointment will need be to rescheduled. We look forward to working with you during this exciting time.

Sincerely,
Kulshan Veterinary Hospital

Please return all pages via mail or email prior to the appointment.

Email: we.care@kulshanvet.com

Mailing Address: 8880 Benson Rd, Lynden, WA 98264





Kulshan Veterinary Hospital, PLLC

IF SELLER OR AGENT IS A PAST OR CURRENT CLIENT OF KULSHAN VETERINARY HOSPITAL, PLEASE READ AND SIGN BELOW:

A potential conflict of interest exists when a veterinarian from our office either

- i) Has worked for the seller and/or
- ii) Has had the horse as a patient of Kulshan Veterinary Hospital

The buyer must realize that all information obtained during the examination and discussions relating to these findings are privileged information between the veterinarian and the buyer or his or her agent(s). This information can only be made available to the seller with the consent of the buyer. The buyer's signature below is NOT consent to disclose such information to the seller.

The buyer's signature below only indicates the buyer has read these statements and agrees to hold harmless Kulshan Veterinary Hospital and the examining veterinarian from any real or perceived loss in the present or future value of the horse as a result the examination and the opinions rendered therein.

Signed by Buyer: _____ Date: _____

Buyer's Name: _____



Kulshan Veterinary Hospital, PLLC

RELEASE OF PREVIOUS KULSHAN VETERINARY HOSPITAL RECORDS

IF SELLER OR AGENT IS A PAST OR CURRENT CLIENT OF KULSHAN VETERINARY HOSPITAL, PLEASE READ AND SIGN BELOW:

A potential conflict of interest exists when a veterinarian from our office examines a horse owned by a client of this practice. The seller must realize that in this situation the veterinarian performing the examination is working for, and in the sole interest of, the purchaser. If our office has records and history relating to the horse in question, it is essential to disclose that to the buyer to provide him or her with all available information.

This being said, the seller's signature below releases Kulshan Veterinary Hospital and the examining veterinarian to disclose to the buyer all medical records available concerning the horse offered for sale to the prospective buyer, his or her representatives and others that the buyer may indicate.

The seller must also realize that all information obtained during the examination and discussions relating to these findings are privileged information between the veterinarian and the purchaser or his or her agent(s). This information can only be made available to the seller with the consent of the buyer.

If the seller refuses to disclose these records, our office will be unable to perform a prepurchase examination on this horse.

The seller's signature below indicates the seller has read these statements and agrees to hold harmless Kulshan Veterinary Hospital and the examining veterinarian from any real or perceived loss in the present or future value of the horse as a result the examination and the opinions rendered therein.

Signed by Seller: _____ Date: _____

Seller's Name: _____

RELEASE OF PREVIOUS MEDICAL RECORDS FROM CLINICS OTHER THAN KULSHAN VETERINARY HOSPITAL

Have you released all previous medical history for this horse?

_____ Yes

To whom has the information been released? _____

_____ No

As part of the prepurchase examination, we request that all previous medical records be released to the examining veterinarian. Failure to provide those records may result in an incomplete medical history. The buyer will be informed by our office that such records exist but have not been released.

Signature of Seller _____ Date _____



Kulshan Veterinary Hospital, PLLC

PREPURCHASE EXAMINATION – LIABILITY RELEASE AGREEMENT

_____ (buyer's name), hereafter "buyer," is the prospective purchaser or prospective purchaser's agent. Buyer acknowledges that Kulshan Veterinary Hospital, its veterinarians, employees, technicians and staff have agreed to perform a pre-purchase examination at your request on a horse named _____ upon the terms and conditions of this agreement which includes a promise by buyer not to sue based upon buyer dissatisfaction with an executed purchase of the animal examined and identified in this agreement.

Kulshan Veterinary Hospital will perform a pre-purchase examination of _____ (horse's name) on or around _____ (date of prepurchase exam).

The scope of the examination and the selection of diagnostic tests chosen shall be determined by the buyer who may consult with Kulshan Veterinary Hospital. The veterinarian who conducts the prepurchase examination will provide you with information regarding any existing medical problems and the horse's overall healthy and condition on the given day of the examination. The examination is not intended to be used as a prognosis for future health, soundness, or a warranty for the horse's suitability for any particular future use or purpose. The veterinarian's job is neither to pass or fail the animal being examined. The determination by buyer to purchase the animal examined is solely buyer's choice and responsibility.

The buyer should be aware that this examination does not encompass an in-depth evaluation of the horse's temperament, ability, or aptitude for a particular discipline. It describes the horse's healthy and soundness on the day and time of the examination. A routine prepurchase examination may not reveal subtle unsoundnesses, especially if the horse has not been in hard/consistent work in the preceding months. Some conditions, such as mild recurrent airway obstruction ("heaves"), mild vision impairment, early PPID ("Cushing Disease"), digestive disorder predisposing to colic signs, and muscle disorder such as equine polysaccharide storage myopathy ("tying up") may not be apparent during an examination.

The veterinarian's assessment is also partially dependent on the information, records and statements provided by the seller. Buyer acknowledges that a material condition of Kulshan Veterinary Hospital agreement to perform this prepurchase examination is buyer's agreement to release, waive and discharge Kulshan Veterinary Hospital, its veterinarians and employees from all claims arising directly or indirectly from the performance of the prepurchase examination; this is a promise by the buyer not to sue.

I have read this agreement, "Prepurchase Examination- Liability Release Agreement," and fully understand its terms. I intend my signature to be a complete and unconditional liability release to Kulshan Veterinary Services.

Signature of Buyer _____ Date _____

Name of Buyer _____

*A proud
member of*





Kulshan Veterinary Hospital, PLLC

www.KulshanVet.com

PREPURCHASE EXAM BUYER'S STATEMENT – GENERAL INFORMATION

Date of Exam _____

Buyer's name: _____ Address: _____

Phone #: _____

Email address: _____

1. Horse's name: _____ Age: _____ Breed: _____ Sex: _____

2. Seller's name: _____

3. Intended use for the horse? _____

4. Describe the intender rider:

a. Adult, teenager, or child? _____

b. Experience of intended rider? _____

5. Has the intended rider ridden this horse? _____

a. How many times? _____

b. Where? (arena, trail, etc.)? _____

6. Will you be present for the prepurchase examination? _____

a. If not, *how* can we contact you during the exam? _____

7. Are there any specific concerns? _____

8. Is there any written or verbal agreement between buyer and seller regarding the purchase / down payment and the pre-purchase exam results? _____

a. If written, may we have a copy of that agreement? _____

Said veterinary purchase examination does not warrant the suitability of the horse for the purpose intended and is expressly limited by my statements and instructions on the depth of the examination desired, the specific test(s) which I have requested be performed, and the fee I have agreed to pay.

Buyer's signature: _____ Date: _____

TO BE COMPLETED BY BUYER: Pre-Purchase Exam (PPE) Estimated Costs and Ancillary tests

Farm call charge or Hospital call charge:

- Farm call charge - \$105-\$130
- Hospital call charge - \$26

Standard Pre-Purchase Exam (PPE) – Clinical and Moving Examination:

The clinical exam begins with a thorough history of past preventative health measures and medical or surgical issues. Next, a comprehensive physical examination will be performed including body condition score, respiratory, cardiovascular, neurological, and gastrointestinal systems, coat/skin, musculoskeletal, and ophthalmic systems. Finally, the moving phase of the examination will be performed. The horse will be examined at a walk and trot in hand. Hoof testers and flexion tests will be performed on all four limbs. If possible, the horse will then be lunged at the walk, trot, and canter in both directions, with several transitions. *ESTIMATED COST - \$250-\$375 for Doctor's time and \$67.50-101.25 for the Technician's time. These costs do not include x-rays or lab work.*

NOT INCLUDED THE STANDARD PPE BUT AVAILABLE AT ADDITIONAL COST TO THE BUYER:

Please read through our options below and select additional services/diagnostics you would like to add to the PPE. Estimated prices for these additional services/diagnostics are listed.

☐ Digital radiography (with this technology, images are immediately available on site)

- Wide range of costs depending on number of areas radiographed and number of views taken.
- **Radiograph Set up fee is \$35**
- Problems sometimes can be found on x-rays that are not yet causing external signs, for instance, early stages of arthritis, navicular disease, and OCD.
 - Buyers might request specific areas to be radiographed, such as only front feet or only hocks.
 - More extensive series of radiographs can be requested, such as front feet, hocks, *and* stifles.
 - Less often, radiographs of the neck, splint bones, and back are requested.
- Another reason radiograph's are taken is when issues arise about a specific area during the PPE that radiographs can offer useful information.
- It is preferred that shoes be removed for feet x-rays.
- A copy of the radiographs can be provided upon request. The digital format allows radiographs to be readily available and easy to share.
- If x-rays are requested, please select from the list of commonly requested studies below:

<input type="checkbox"/> Front feet – screening (2 views per foot)	\$374.24	<input type="checkbox"/> Both front feet & hocks – screening (2 views per site)	\$685.48
<input type="checkbox"/> Front feet – full set (4 views per foot)	\$685.48	<input type="checkbox"/> Both front feet & hocks – full set (4 views per site)	\$1,307.91
<input type="checkbox"/> Hocks – screening (2 views per hock)	\$374.24	<input type="checkbox"/> Both front feet, hocks, stifles – screening	\$996.72
<input type="checkbox"/> Hocks – full set (4 views per hock)	\$385.48	<input type="checkbox"/> Both front feet, hocks, stifles – full set	\$1,727.24
<input type="checkbox"/> Both stifles (4 views per stifle)	\$685.48	<input type="checkbox"/> If you would like specific views other than the packages above, please write them in the space below: First X-ray is \$140.81 and each additional view is \$77.81	

Additional cost for sedation if necessary: \$23.5- + cost of drugs : Average is \$50 - \$60

Ancillary tests *continued* on next page...

TO BE COMPLETED BY BUYER: Continuation of Pre-Purchase Exam (PPE) Estimated Costs and Ancillary tests:

- ☐ **Radiograph consult -** Radiographs can be sent and evaluated by a Radiologist Specialist for an additional cost - ????
- *Dependent on number of views – estimate can be given if requested

☐ **Laboratory Tests:**

- | | | |
|--|--|----------------------|
| <input type="checkbox"/> Complete Blood Count - | Provides data regarding the <i>cells</i> in the blood (white blood cells, red blood cells, platelets) detecting problems such as anemia | \$56.95 |
| <input type="checkbox"/> Serum Amyloid Assay - | Detects signs of inflammation and infection | \$53.40 |
| <input type="checkbox"/> Chemistry profile - | Provides data regarding muscle enzymes, electrolytes, proteins, antibodies and the function of the kidneys, liver, and other organs | \$154.95 |
| <input type="checkbox"/> Insulin Resistance - | Insulin levels & glucose levels; detects Insulin Resistance and Equine Metabolic Disease | \$86.00 |
| <input type="checkbox"/> ACTH levels & Insulin Resistance | ACTH levels assists in diagnosis of Cushing's Disease | \$157.00 |
| <input type="checkbox"/> Coggins test - | Tests for Equine Infectious Disease; required for Interstate & International transport | \$68.70 |
| <input type="checkbox"/> Drug screen - | Price is dependent on the level of drug screening selected. Testing is done at an outside lab and results are not available for at least <i>ten</i> days. Testing can be done on several different categories: anti-inflammatories, muscle relaxers, steroids, tranquilizers, sedatives. | \$420.00 to \$470.00 |
| <input type="checkbox"/> Fecal Egg Count - | Checks for internal parasites | \$51.10 |

- **Note:** There is a \$12 blood draw fee for blood tests (a single \$12 fee no matter how many tests are done)

☒ **Other procedures:**

- | | | |
|---|---|---------|
| <input type="checkbox"/> Interstate Health Certificate - | Required for transporting horses to another state | \$65.00 |
| <input type="checkbox"/> Insurance exam - | Insurance form required to apply for Mortality and/or Major Medical Insurance | \$62.50 |

Please read the following statements and sign and date below:

- I request that the aforementioned horse be examined for purchase.
- Examination procedures not selected are waived or declined as part of this exam
- The pre-purchase examination reflects the health and suitability for intended use of the horse on the day of the examination and is no guarantee of future soundness or suitability.

Print name

Signature

Date: _____



Kulshan Veterinary Hospital

PRE-PURCHASE EXAM: SELLER'S STATEMENT

Seller's name: _____ Address: _____
Phone #: _____
Email: _____
Barn name: _____ Registered name: _____
Breed: _____ Registration #: _____
Color: _____ Horse's Sex: _____

1. How long have you owned this horse? _____
2. What have been this horse's principle activities? _____
3. What has been the most recent training schedule? _____
4. Has this horse presented for a PPE prior to today? Y ☐ N ☐ Date: _____
5. Intended use of this horse for the prospective buyer: _____

6. Vaccination History (past 18 months):

Vaccine name and/or disease(s) covered	Date administered
i. _____	_____
ii. _____	_____
iii. _____	_____
iv. _____	_____

7. Deworming History (past 18 months)

Name of product or active ingredient	Date administered
i. _____	_____
ii. _____	_____
iii. _____	_____

8. Dental/Floating History (past 18 months) – list the date(s) performed

i. _____
ii. _____
iii. _____

9. Trimming and Shoeing:

Date of last trim: _____ Front shoes: Y ☐ N ☐ Back shoes: Y ☐ N ☐

10. Vices, Behavioral Problems:

- | | |
|--|--|
| <input type="checkbox"/> Cribbing, Windsucking | <input type="checkbox"/> Runs fence line |
| <input type="checkbox"/> Stall Weaving | <input type="checkbox"/> Bully to other horses |
| <input type="checkbox"/> Herd Bound (Separation Anxiety) | <input type="checkbox"/> Other (please describe in space provided below: |

11. Medications – list all medications given in past 30-days

Medication	Dose	Frequency	Date(s)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. Feeds and Supplements:

Feed or Supplement	Amount	Number times per day
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

13. Please check boxes & describe in the space below past or present health problems with any of the following:

- ☐ Lameness
- ☐ Skin problems (hair loss, hives, lumps, tumors, etc.)
- ☐ Respiratory (cough, nasal discharge, etc.)
- ☐ Eye problems
- ☐ Dental problems
- ☐ Neurological problems
- ☐ Colic
- ☐ Diarrhea, loose stool

- ☐ Muscle soreness, Tying-up
- ☐ Pregnancy
- ☐ Joint injections
- ☐ Previous x-rays
- ☐ Behavioral issues (Cribbing, stall weaving, trailering, etc.)
- ☐ Pregnancy
- ☐ Please list current and previous medications
- ☐ Please list previous laboratory tests (blood work, Coggins, fecal, etc.)

Describe details here (if more space is needed, please use the next page):

14. Is there a written or verbal agreement between buyer and seller regarding the purchase/down payment and the pre-purchase exam results? If so, can we have a copy?

☐ Yes ☐ No

15. Will you be present for the exam?

☐ Yes ☐ No

16. I, the undersigned, certify I am the ☐ owner or ☐ authorized agent (check appropriate box) of the above described animal. I hereby grant my consent to allow the examination procedures to be performed by a veterinarian of Kulshan Veterinary Hospital, PLLC, for the purpose of determining the health status of the horse listed above prior to sale.

Printed name

Signed name

Today's date