



June 26, 2026

I examined "Scooter" an approximately 7 year-old, bay Quarter Horse gelding on June 26, 2026. His pulse (36 beats per minute), and respiration (16 breaths per minute) were normal rate at rest. Auscultation of his heart revealed no arrhythmias or heart murmurs. His mucous membranes were pink and the capillary refill time was two seconds. Both his left and right jugular veins were patent. He was calm and well-mannered during the exam. BCS 5.5/9.

All aspects of his nervous system were within normal limits. He was alert and carried his head normally and there was no head tilt noted during the exam. No proprioceptive deficit was noted in any of the four limbs. He turned circles to the left and right normally. He had normal strength on tail pull and backed and crossed the legs over normally.

The ophthalmic exam was performed and had a menace and pupillary light response in both eyes. The anterior and posterior chambers of the left and right eye were normal. The right and left third eyelids were normal. He does not like his ears touched.

His respiratory system auscultated within normal limits. He had normal air passage out of both nostrils. The trachea and lungs auscultated normally. Upper airway endoscopy was not performed. His teeth are in good condition and appear to have been floated but have some mild enamel points. He had normal intestinal sounds in all aspects of his abdomen, and I did not hear any sand in the ventral abdomen.

Examination of his skin and coat revealed no obvious evidence of surgical sites, in the pastern (neurectomy), the hock (cunean tenectomy), or abdomen (colic surgery). He had a healthy coat, mane, and tail.

Examination of his musculoskeletal system revealed the following:

Left Front: Foot cool and normal digital pulse. He was not shod. He was negative to hoof testers. He has a good conformation to the hoof. The suspensory ligament, deep digital flexor tendon, and superficial digital flexor tendon were examined for heat, pain and swelling. All three structures palpate normally. He has no effusion of the digital flexor sheath, fetlock, coffin joint, or carpal joints. He was not lame trotting in a straight line or in circles on dirt or concrete.

Right Front: Foot cool and normal digital pulse. He was not shod. He was negative to hoof testers. He has a good conformation to the hoof. The suspensory ligament, deep digital flexor tendon, and superficial digital flexor tendon were examined for heat, pain and swelling. All three structures palpate normally. He has no

effusion of the digital flexor sheath, fetlock, coffin joint, or carpal joints. He was not lame trotting in a straight line or in circles on dirt or concrete.

Left Rear: Foot cool, no increased digital pulse and no response to hoof testers. He was not shod behind. The suspensory ligament and flexor tendons palpated within normal limits. He has good range of motion in the fetlock, hock, and stifle. He has no effusion of the fetlock joint, digital flexor sheath, hock, tarsal sheath or stifle. He was not lame on this leg trotting in a straight line or in a circle to the right or left. He was negative to lower and upper limb flexion.

Right Rear: Foot cool, no increased digital pulse and no response to hoof testers. He was not shod behind. The suspensory ligament and flexor tendons palpated within normal limits. He has good range of motion in the fetlock, hock, and stifle. He has no effusion of the fetlock joint, digital flexor sheath, tarsal sheath, hock, or stifle. He has a medial buttress of the lower hock. He had a -3/5 lameness on this leg trotting in a straight line and circles. He was negative to lower limb and 3/5 to upper limb flexion.

Palpation of his neck, back, and SI showed no soreness. He had full range of motion of the neck bending to the left and the right.

Radiographs:

Right hock: TMT is fusing with a medial bridge and 3rd tarsal bone lysis.

In summary, Scooter had a normal physical exam and a RH lameness at a trot. The TMT joint of the hock was injected with methyl prednisolone. The plan is to recheck in one week.

Please remember that a prepurchase exam cannot predict or guarantee the future soundness of a horse.

Sincerely,

Beau Whitaker, DVM



Salado Equine Medical Center

1920 FM 2268
Salado, TX 76571
www.saladoemc.com

Tel: (254) 947-1292

SCAN ME

Invoice

Bailey Knepper
121 Private Rd. 830
Troy, TX 76579

Number: 729842
Date: ~~July 06, 2026~~
~~Printed:~~ July 06, 2026

Patient: Scooter

Doctor	Performed	Description	Quantity	Amount
Janicek, J	7/6/26	EXAM - Lameness Basic / Recheck Exam	1	\$60.50

Exam Notes: History: Patient had a PPE preformed on 6-26-26 by Dr. Whitaker, at the time of the pre-purchase it was found that the right hind TMT/DIT joints were fusing; right hind hock was injected with Depo 40. Patient is getting the right hindlimb lameness reevaluated today to see if patient has responded to injections.

Exam: No forelimb lameness present. 0.5/5 right hindlimb lameness. LH and RH upper limb flexions do not change the gait. LH and RH upper limb extensions do not change the gait.

Plan: Return to training.

Payment	Amount	Date
Visa (GP)	\$60.50	06-Jul-2026

Subtotal:	\$60.50
Payments:	\$(60.50)
Total Due:	\$0.00

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