



Windridge Ltd.

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STALLION BREEDING SOUNDNESS EXAM

Insured: _____

Address: _____

Phone Number: _____ E-Mail: _____

Name of Stallion: _____

Breed: _____ Age: _____ Color: _____ Stud Fee: \$ _____

Physical Breeding Condition: _____

External Genital Examination Method(s) Used:

Palpation _____ Ultrasound _____ Other _____

Testicles of normal dimension and consistency & fully descended into scrotum? Y / N

Penis and prepuces appear normal and free of any sores, infection, tumors or injury? Y / N

Detail any abnormal findings: _____

Breeding Method: _____ Artificial Insemination _____ Live Cover _____ Both _____

*Pasture Breeding? Y / N

*ASD coverage not available on pasture breeding stallions without prior company approval.

Behavior and Breeding Ability: Rate on a scale of 1 to 5 (1 being excellent/ 5 being poor)

Temperament/Ease of Handling _____ Libido _____

Erection _____ Mounting _____

Intromission _____ Ejaculation _____

Detail any abnormal findings or poor scores _____

Has a Semen Evaluation been done? _____ If so, attach summary report of findings.

Has the stallion received any drugs, ns aids, or anabolic or other steroids in the past year? _____ If so, please explain _____

Any comments or concerns? _____

SIGNATURE OF VETERINARIAN DATE OF EXAM

ADDRESS PHONE NUMBER