

**CERTIFICATE OF CAMELID VETERINARY EXAMINATION**

**For alpacas aged 60 days or over**

Date of examination: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Animal Identification:**

Colour: \_\_\_\_\_

Ear Tag: \_\_\_\_\_

Microchip No.: \_\_\_\_\_

Sex: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ (or) Estimation of Age: \_\_\_\_\_

This is to certify that I \_\_\_\_\_, have today examined the animal described above, and my opinion at the time of examination is as follows:-

**DETAILS OF EXAMINATION**

**1. Limbs and Locomotion:**

Lameness: YES/NO Comment if any: \_\_\_\_\_

Limb Deformities: YES/NO Comment if any: \_\_\_\_\_

Feet/Cleats/Pads: Normal/Abnormal Comment if any: \_\_\_\_\_

Joints: Normal/Abnormal Comment if any: \_\_\_\_\_

**2. Lymph Glands:** Normal/Abnormal Comment if any: \_\_\_\_\_

**3. Condition:** Poor/Lean/Good/Overweight  
(Note: Lean condition in camelids is not necessarily abnormal)

**4. Eyes:**  
Visual Assessment: Normal/Abnormal Comment if any: \_\_\_\_\_

Examination with magnification in dark area: YES/NO

Cornea: Normal/Abnormal Comment if any: \_\_\_\_\_

Lens cataracts observed: YES/NO

Persistent pupillary membrane: YES/NO

Any further observations: \_\_\_\_\_

**5. Teeth:**

Are incisors level with hard pad: YES/NO

Are incisors Normal/Undershot/Overshot

If Undershot or Overshot, state by how much  
e.g., < or > 5mm .....

Number of incisors present: \_\_\_\_\_

Structure of incisors: Very Good/Good/Poor

**6. Mandible Palpation** Normal/Abnormal Comment if any: \_\_\_\_\_

**7. Cardiovascular System auscultation:** Normal/Abnormal Comment if any: \_\_\_\_\_

**8. Respiratory System Examination:** Normal/Abnormal Comment if any: \_\_\_\_\_

**9. a) Male**

Both testicles present: YES /NO  
Measurements: Left: Length.....cm Width.....cm  
Right: Length.....cm Width.....cm

(Note: Average length 4cm, width 3cm in adult alpaca at approximately 3 years of age)

Penis examined: YES/NO Normal/Abnormal

Preputial adhesion: YES/NO

(Note: The prepuce can be adhered to the penis up to 2 to 3 years of age in some males. Normal finding).

**b) Female** External genitalia and mammary glands: Normal/Abnormal

**10. Comments**

Other comments / detected abnormalities / or relevant information regarding examination:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signed:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Print name** \_\_\_\_\_

\_\_\_\_\_

**Qualifications** \_\_\_\_\_

***THIS SECTION TO BE COMPLETED BY OWNER/CUSTODIAN OF THE ANIMAL***

1. Breeding history: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Female - History of Dystocia: YES /NO

Last mating recorded: \_\_\_\_\_

Tests done to support pregnancy status and dates: \_\_\_\_\_

**3. a) Vaccination History**

Last reported date of anti-clostridial vaccine: \_\_\_\_\_

Vaccine used: \_\_\_\_\_

**b) Worming History**

Date of last herd worm egg count: \_\_\_\_\_

Did it Include liver fluke examination: YES/NO Present/Absent

Did it include coccidian examination: YES/NO Present/Absent

Last date of worming and product used: \_\_\_\_\_

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

**Print name** \_\_\_\_\_