

## Equine Veterinarians Australia

A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852





PH: 02 6942 2033

This examination is limited to an assessment of the reproductive matters below and should in no way be relied upon as a representation or expression of opinion as to breeding soundness. It is beyond the scope of this examination to definitively detect if this mare has been treated with Equity® Vaccine or any other medication.

breeding soundness. It is be	eyond the	scope	of this e	examination to d	efinitively de	tect if this ma	are ĥas l	been trea	ated with Equi	ity® Vaccine or	any other	medication.		
Animal presented as: MY THOUSAND Age/DOB: 18-8-200														
(If unnamed) Sire:		Dam: /	HEU	_ 17	5 40,	Τ'								
Breed: T-BRE		Microchip No: 985100010939228												
Owner (if known): BOWNES	<b>z</b> ,	STU	D		Addres	s (if known	):							
Person requesting examination:  MR JOHN NORTH  Place of examination:  BOWNESS STUD														
Rear aspect forelegs L R Rear aspect Rear														
This many was examined (	Janas tisl		<b>-</b> 1	<u> </u>			<u>0'</u>		·	- 67	A F	7		
This mare was examined (please tick)  The mare was (please tick)  Reported last serve date  Vaccination Y/N Date  Pregnant  Pregnant  Pregnant												Date		
Not Sedated	<del>-</del>	regnant	╡	Hendra (HeV) Tetanus										
Other Physical Restraint Strangles														
EHV-1,4														
Ovaries	NL A	b NE		NL Ab NE	Total Ovar	ian Dimensio	ns Lar	gest Folli	cle Diameter	Comments:		•		
Manual Examination Left	V	1.	Right	/ 6	6.5×4	1744.	2	2.7	Cma					
per Rectum  U/S Examination Left			Right	√ @	4.3x	1244 37××		スス	cm					
Uterus NL	Ab	NE	7	Cervix	N		NE	]	Vagina	NL	Ab	NE		
Manual Examination per Rectum				Manual Exan					Manual Exa	mination	/ AD	NE		
U/S Examination			_	U/S Exan					per Vagina U/S Examination					
Y	N	NE		Visual Exan					Visual Exa					
Uterine Cysts? Comments:									per Speculum Comments:					
Uterine Fluid?	Uterine Fluid?						Y N NE Udd				ider NL Ab NE			
Comments: Caslicked / repairs									Visual Exa		1			
				Comments:			-		Manual Exa	mination				
						M, MMP, P			Comments:					
				·····	131-141-14	www.	7							
Other comments	**********		•••••	***************			*********		************		***********			
Date: 29-1	Sig	Signed: POMONOS												
Name (please print): P T WOFF						Place stamp/write address here:								
Date: 29 - 4 - 2019  Name (please print): P J WOTT  Contact Number: 0269422033						COOTAMUNDRA VETERINARY CLINIC								
AVA No: /29 VPB No: 4/1///						COOTAMUNDRA VETERINARY CLINIC 63 MURPAYS 1 1 0								