



Equine Veterinarians Australia

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

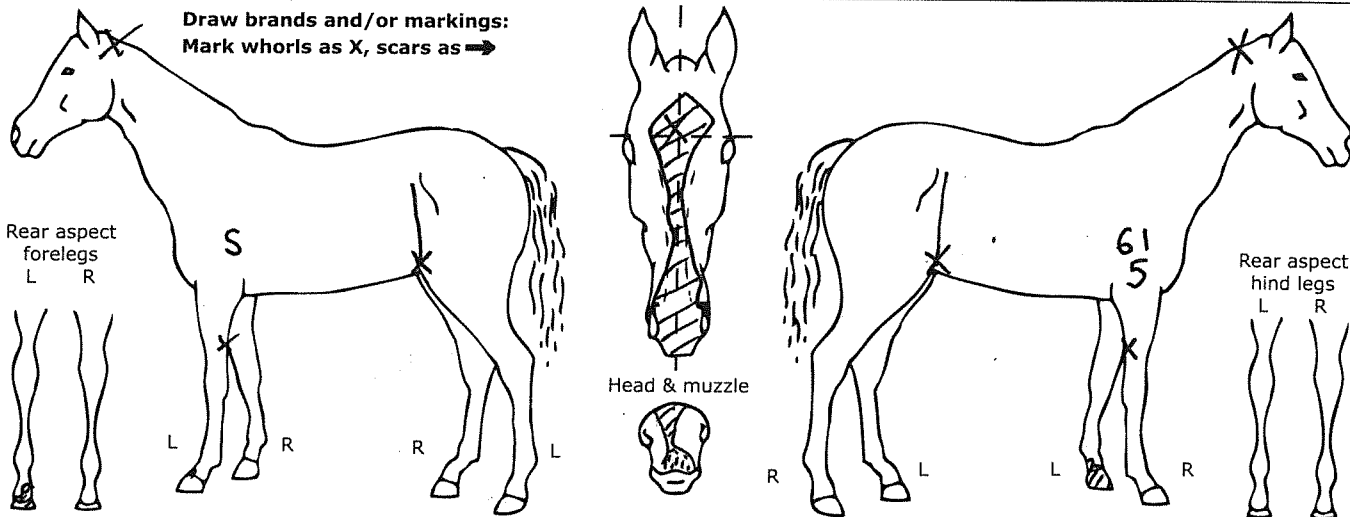
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VETERINARY REPORT ON BROODMARE FOR SALE

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 EquiVax® Vaccine or any other medication.

Animal presented as: BALLERINA GIRL		Age/DOB: 12YR.
(If unnamed) Sire:		Dam:
Breed: THOROUGHBRED	Colour: BAY	Microchip No: /
Owner (if known):		Address (if known):
Person requesting examination: J. DOHERTY		Place of examination: YARRAN THOROUGHBREDS



This mare was examined (please tick)

Under Sedation	<input type="checkbox"/>
Not Sedated	<input checked="" type="checkbox"/>
Other Physical Restraint	<input type="checkbox"/>

The mare was (please tick)

Pregnant	<input type="checkbox"/>
Not Pregnant	<input checked="" type="checkbox"/>

Reported last serve date

(Please tick appropriate boxes - add additional sheets for details if required)

Ovaries	Y	N	Total Ovarian Dimensions (Measured by US)	Largest Follicle Diameter (Measured by US)	Comments
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Left: 52mm	Left: 35mm	HAEMORRHAGIC FOLLICLE
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 47mm	Right: 37mm	
Uterus	Y	N	Details		
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	FOUR SMALL CYSTS - LARGEST 19mm LENGTH 5mm DEPTH SMALL AMOUNT FREE FLUID		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Uterine Cysts	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Uterine Fluid	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Cervix	Y	N	Details		
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NORMAL		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Vagina	Y	N	Details		
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NORMAL		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Vulva	Y	N	Details		
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NEEDS CASLUK		
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Udder	Y	N	Details		
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Other comments

Date: 13.06.18	Signed: Claire Brown
Name (please print): CLAIRE BROWN BVETMed MRCVS	Place stamp/write address here: SEYMOUR EQUINE CLINIC
Contact Number: 0429 028 095	100 POPPLES LANE
AVA No: 19097	HILLDENE VIC 3660
VPB No: 6275	07737