



Equine Veterinarians Australia

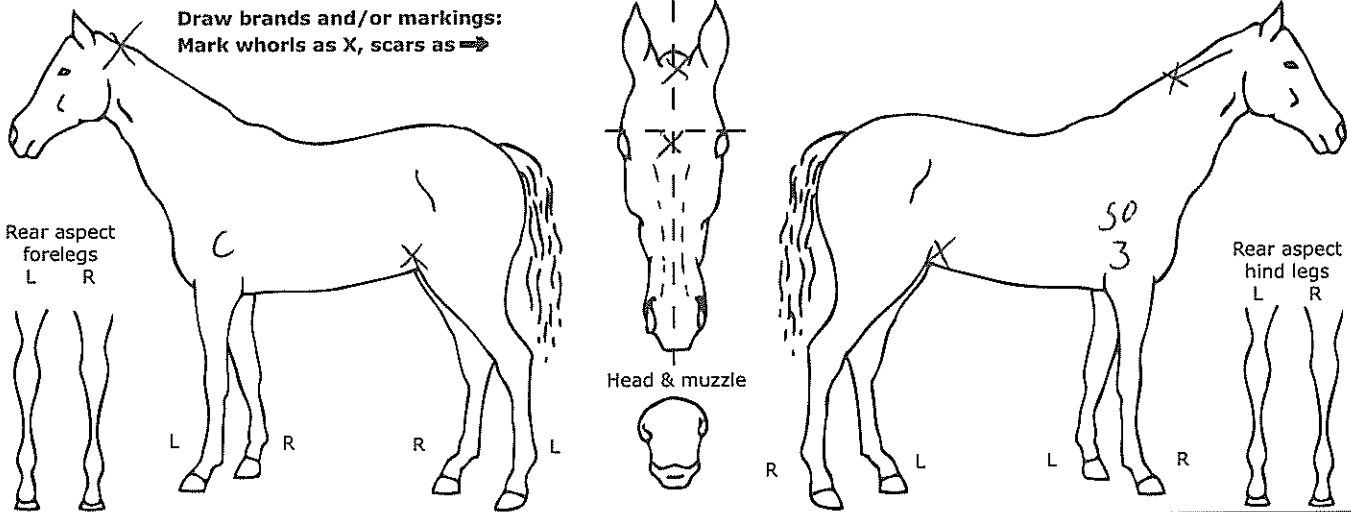
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852

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 EquiVacc® Vaccine or any other medication.

Animal presented as: MOLLY EN		Age/DOB: 4 YEARS
(If unnamed) Sire:		Dam:
Breed: TB	Colour: BAY	Microchip No: 98510002029822
Owner (if known):		Address (if known):
Person requesting examination: G. ISAAC		Place of examination: AQUIS FARM, NSW



This mare was examined (please tick)		The mare was (please tick)		Reported last serve date
Under Sedation	<input checked="" type="checkbox"/>	Pregnant	<input type="checkbox"/>	
Not Sedated	<input type="checkbox"/>	Not Pregnant	<input checked="" type="checkbox"/>	
Other Physical Restraint	<input type="checkbox"/>			

(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: 6.4cm x 3.4cm	Left: 10mm	} No CL's observed.
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 7.3cm x 3.9cm	Right: 1.5mm	
Uterus	Y	N	Details		
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAD		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAD		
Uterine Cysts	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Uterine Fluid	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Moderate uterine edema present.		
Comments					
Cervix	Y	N	Details		
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAD		
U/S Examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAD		
Comments					
Vagina	Y	N	Details		
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAD		
U/S Examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NAD		
Comments					
Vulva	Y	N	Details		
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments					
Udder					
Visual Examination	NAD				
Manual Examination					

Other comments
No evidence of ovarian cyclicity at this time

Date: 5.4.2018	Signed: <i>[Signature]</i>
Name (please print): AARON HODDER	Place stamp/write address here: 09201
Contact Number: (02) 6545 1333	Scone Equine Hospital 106 Liverpool St Scone NSW 2337
AVA No: 15128	