



Equine Veterinarians Australia

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

VETERINARY REPORT ON BROODMARE FOR SALE

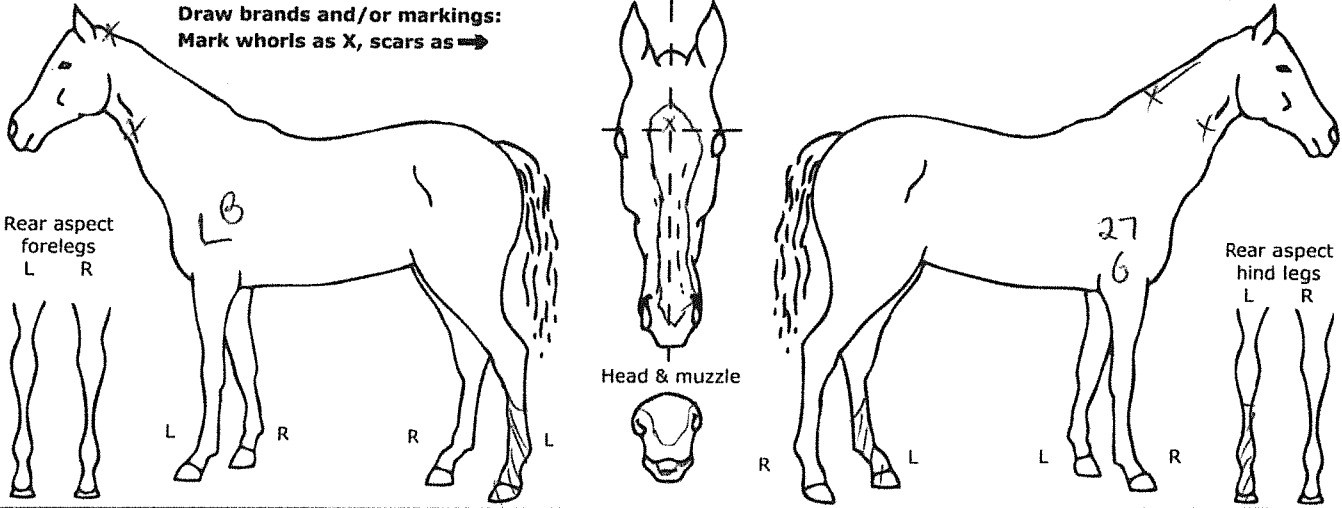
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This examination is limited to an assessment of the reproductive matters below and should in no way be relied upon as a representation or expression of opinion as to breeding soundness. It is beyond the scope of this examination to definitively detect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

Animal presented as: Mosso Arioso		Age/DOB: 12
(If unnamed) Sire:		Dam:
Breed: Thoroughbred	Colour: Chestnut	Microchip No: 985121004595080
Owner (if known): Campolina Pty/Ltd		Address (if known):
Person requesting examination: Eric Foster		Place of examination: Barwon Equine Hospital

Draw brands and/or markings:
Mark whorls as X, scars as ⇒



This mare was examined (please tick)	The mare was (please tick)	Reported last serve date	Vaccination	Y/N	Date
Under Sedation	Pregnant	20/11/18	Hendra (HeV)		
Not Sedated <input checked="" type="checkbox"/>	Not Pregnant <input checked="" type="checkbox"/>		Tetanus		
Other Physical Restraint <input checked="" type="checkbox"/>	crush		Strangles		
			EHV-1,4		

Ovaries		NL	Ab	NE		NL	Ab	NE	Total Ovarian Dimensions	Largest Follicle Diameter	Comments:
Manual Examination per Rectum	Left	<input checked="" type="checkbox"/>			Right	<input checked="" type="checkbox"/>			Right 3.5 x 5.3	1.88	
U/S Examination	Left	<input checked="" type="checkbox"/>			Right	<input checked="" type="checkbox"/>			Left 4 x 4.9	1.47	

Uterus	NL	Ab	NE
Manual Examination per Rectum		<input checked="" type="checkbox"/>	
U/S Examination		<input checked="" type="checkbox"/>	
	Y	N	NE
Uterine Cysts?			
Uterine Fluid?	<input checked="" type="checkbox"/>		

Comments: **Air and uterine fluid.**

Cervix	NL	Ab	NE
Manual Examination per Vagina		<input checked="" type="checkbox"/>	
U/S Examination		<input checked="" type="checkbox"/>	
Visual Examination per Speculum		<input checked="" type="checkbox"/>	

Comments: **open.**

Vulva	Y	N	NE
Caslicked / repairs?	<input checked="" type="checkbox"/>		

Comments: **inadequate vulval seal.**

Vagina	NL	Ab	NE
Manual Examination per Vagina			<input checked="" type="checkbox"/>
U/S Examination	<input checked="" type="checkbox"/>		
Visual Examination per Speculum			<input checked="" type="checkbox"/>

Comments:

Udder	NL	Ab	NE
Visual Examination	<input checked="" type="checkbox"/>		
Manual Examination	<input checked="" type="checkbox"/>		

Comments:

Other comments: **Cervix not adequate seal & open. Urine in vaginal vault.**

Date: 12/6/19	Signed: K Splatt
Name (please print): Kylie Splatt	Place stamp/write address here:
Contact Number: 0412509609	Barwon Equine Hospital 8-12 Cooney St. Moolap 3221 Ph: 03 52488899/F: 03 5242018 ABN: 65078995790
VA No: 1744	

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