

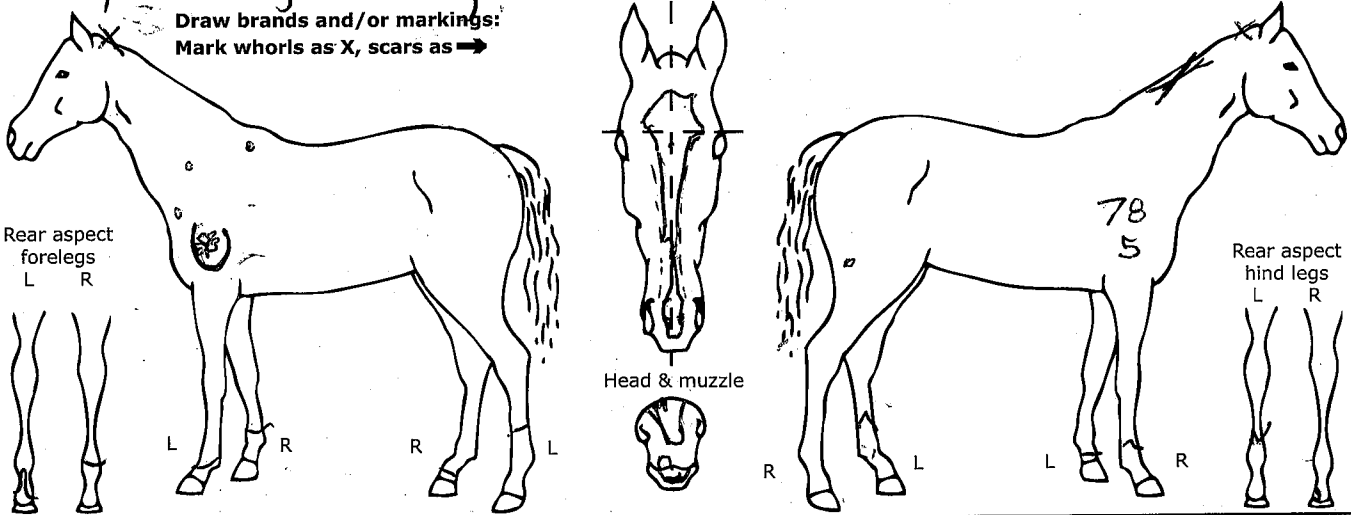


VETERINARY REPORT ON BROODMARE FOR SALE

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: Kentucky Wildcat		Age/DOB: 27/8/2015
(If unnamed) Sire: All American		Dam: She's a wild cat
Breed: TB(Thoroughbred) Colour: Bay	Microchip No: 985100012100946	
Owner (if known):	Address (if known):	
Person requesting examination: Anthony Cummings Racing	Place of examination: Randwick Equine Centre, 3 Jane street, Randwick, 2031, NSW	

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
Under Sedation <input checked="" type="checkbox"/>	Pregnant <input type="checkbox"/>	NA
Not Sedated <input type="checkbox"/>	Not Pregnant <input checked="" type="checkbox"/>	WNL = within Normal Limits
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: 59 x 39mm	Left: 8.7mm	WNL
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 47 x 34mm	Right: 15.8mm	WNL

Uterus	Y	N	Details	Vagina	Y	N	Details
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL	Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL	U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL
Uterine Cysts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	none seen	Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL
Uterine Fluid	<input checked="" type="checkbox"/>	<input type="checkbox"/>	" "	Comments	<input type="checkbox"/>	<input type="checkbox"/>	WNL
Comments	<input type="checkbox"/>	<input type="checkbox"/>	WNL				

Cervix	Y	N	Details	Vulva	Y	N	Details
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL	Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL	Comments	<input type="checkbox"/>	<input type="checkbox"/>	WNL
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL				
Comments	<input type="checkbox"/>	<input type="checkbox"/>	WNL				

Udder	Y	N	Details
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WNL

Other comments
WNL

Date: 10/05/2020	Signed: Hayley Lang
Name (please print): Dr. Hayley Lang	Place stamp/write address here: RANDWICK EQUINE CENTRE 1076 3 JANE ST RANDWICK NSW 2031 PO BOX 195 RANDWICK NSW 2031 PH: (02) 9399 7722 FAX: (02) 9398 5649 www.randwickequine.com.au
Contact Number: 02 9399 7722	
AVA No: 46834	VPB No: NSW V10498