



# Equine Veterinarians Australia

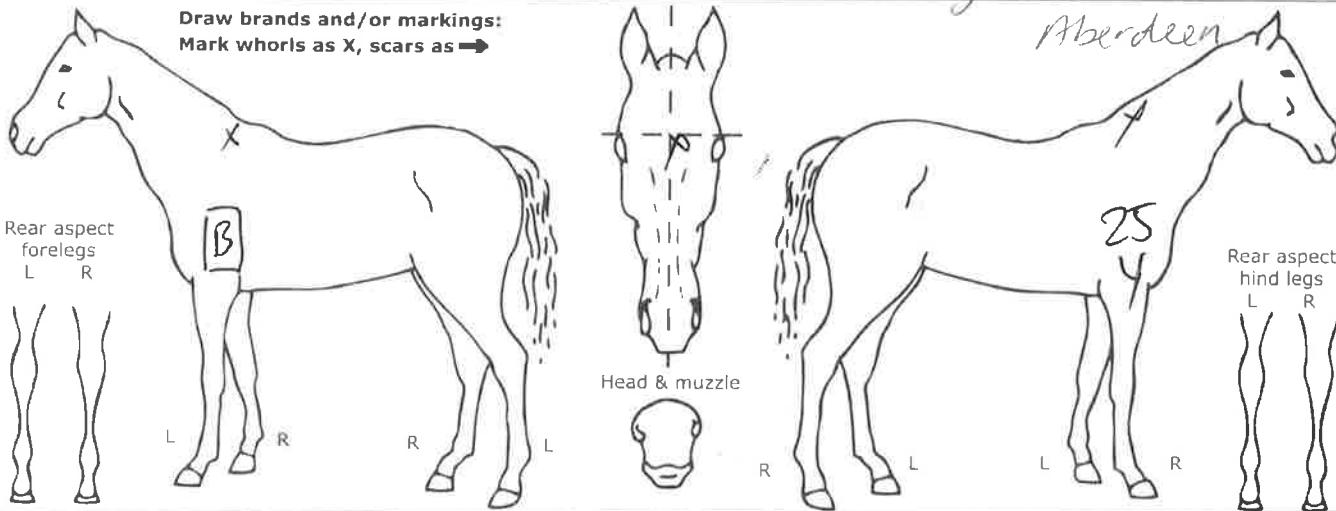
A Special Interest Group of the Australian Veterinary Association Ltd, ABN 63 008 522 852



## 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 Equity® Vaccine or any other medication.

Animal presented as: <b>Love's Great</b>		Age/DOB:
(If unnamed) Sire:		Dam:
Breed: <b>TD</b>	Colour: <b>Bay</b>	Microchip No: <b>985100010814985</b>
Owner (if known):		Address (if known):
Person requesting examination: <b>Rachel Satir</b>		Place of examination: <b>Newgate Farm Aberdeen</b>



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

Ovaries		NL	Ab	NE		NL	Ab	NE	Total Ovarian Dimensions	Largest Follicle Diameter	Comments:
Manual Examination per Rectum	Left				Right				70mm x 60mm	40mm	
U/S Examination	Left				Right				55mm x 65mm	30mm	

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

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

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"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:			

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

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

**Other comments** .....

Date: <b>5.5.20</b>	Signed:
Name (please print): <b>JAMES DAWSON</b>	Place stamp/write address here:
Contact Number: <b>0431634557</b>	<b>Hunter Equine Centre Score NSW</b>
AVA No:	VPB No: <b>11657</b>

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