



Equine Veterinarians Australia

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

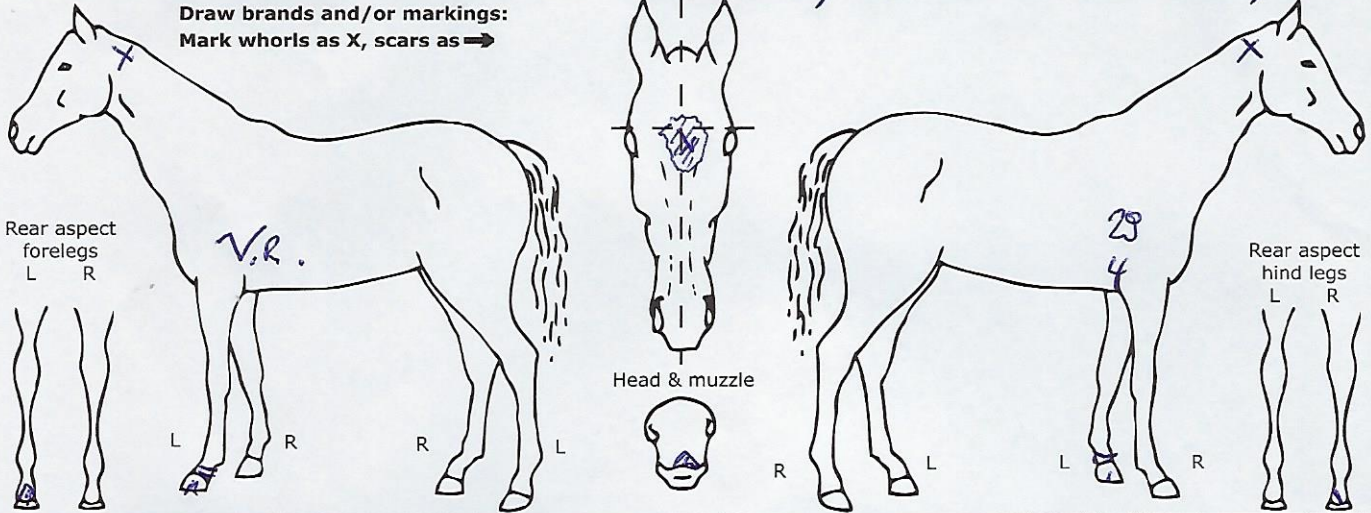


VETERINARY REPORT ON BROODMARE FOR SALE

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: THINK BLUEE		Age/DOB:
(If unnamed) Sire:		Dam:
Breed:	Colour: BAY/BROWN	Microchip No: 985100012049266
Owner (if known):		Address (if known):
Person requesting examination: RANDNICK BLOODSTOCK AGENCY		Place of examination: MULBING, 17 MOUNT VINCENT, NSW

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



This mare was examined (please tick)

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

<input type="text"/>

(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 type="checkbox"/>	<input type="checkbox"/>	Left: 4.8 x 3.9 cm	Left: 27	old CORPUS LUTEUM visible
U/S Examination	<input type="checkbox"/>	<input type="checkbox"/>	Right: 4.6 x 3.8 cm	Right: 22	multiple small follicle
Uterus	Y	N	Details		
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	oestrus		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Uterine Cysts	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Uterine Fluid	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Cervix	Y	N	Details		
Manual Examination per Vagina	<input type="checkbox"/>	<input checked="" type="checkbox"/>	within normal limits		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Visual Examination per Speculum	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Vagina	Y	N	Details		
Manual Examination per Vagina	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Visual Examination per Speculum	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Vulva	Y	N	Details		
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments	<input type="checkbox"/>	<input type="checkbox"/>			
Udder					
Visual Examination	<input checked="" type="checkbox"/>				
Manual Examination	<input type="checkbox"/>				

Other comments

<input type="text"/>

Date: 1/5/20
Name (please print): CELIA CORINA & FAVNA
Contact Number: 02 4927 6135
AVA No: <input type="text"/>
VPB No: N8533

Signed: **Celia Corina & Favna**

Place stamp/write address: NEWCASTLE EQUINE CENTRE OLD TOTE BUILDING BROADMEADOW RACECOURSE P.O. Box 123, Broadmeadow NSW 2292 Ph: (02) 4927 6135 Fax: (02) 4927 6134
