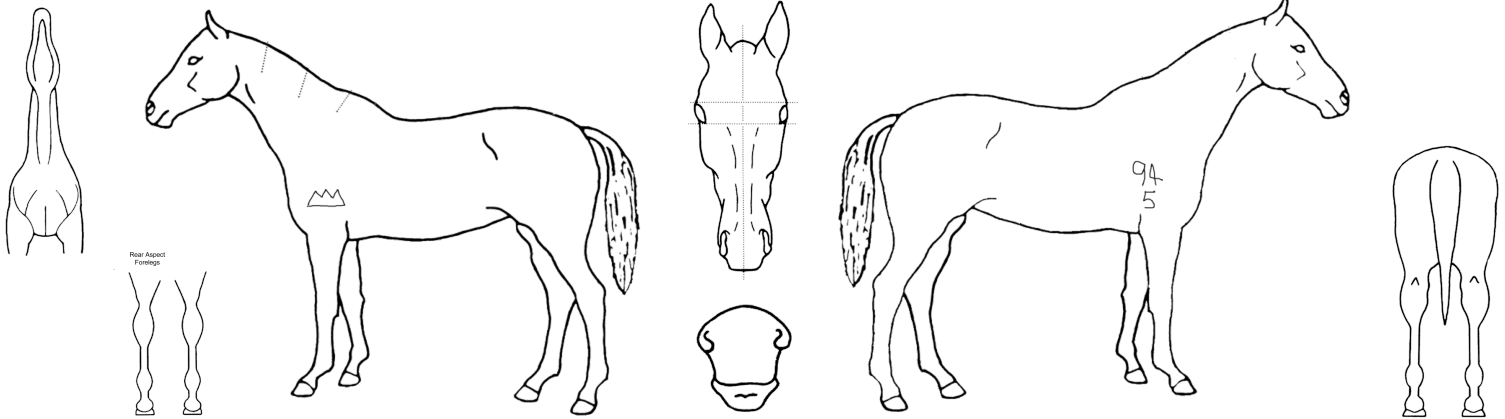


## VETERINARY REPORT ON BROODMARE FOR SALE

This examination is limited to an assessment of the specified 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: So You Swing (AUS)		
(If unnamed) Sire: So You Think (NZ)		Dam: Swinging Feeling (NZ)
Colour: Bay	Breed: Thoroughbred	Sex: Filly
Microchip No: 985100012059196		DOB: 12/10/2015
Owner (if known):		
Person requesting examination: Merricks station		Place of examination: -37.6120 144.8343



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 service date


(Please tick appropriate boxes - add additional sheets for details if required)

Ovaries	Y	N	Total Ovarian Dimensions	Largest Follicle Diameter	Comments
Manual examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Left: 3.1x4.1	Left: 1.45x1	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 3x 4.2	Right: 1.2x0.7	

Uterus	Y	N	Details	Vagina	Y	N	Details
Manual examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Manual examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>		U/S Examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Uterine Cysts	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Uterine Fluid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<b>Vulva</b>	<b>Y</b>	<b>N</b>	<b>Details</b>
<b>Cervix</b>	<b>Y</b>	<b>N</b>	<b>Details</b>	Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Manual examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>	U/S Examination	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>General Clinical Exam</b>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Udder Examination	Nad		
				Feet Examination	Nad		
				Eye Examination	Nad		

Other relevant clinical abnormalities:

Date: 03-07-2021	
Name: Ian Church	
Contact Number: 0418345192	
Address: 47 Bay Street Brighton VIC 3186	
AVA No: 6188 VPB No: 2090	
Signed: <small>Signature</small>	

Equine Veterinarians Australia - Thoroughbred Broodmare Report