



Equine Veterinarians Australia

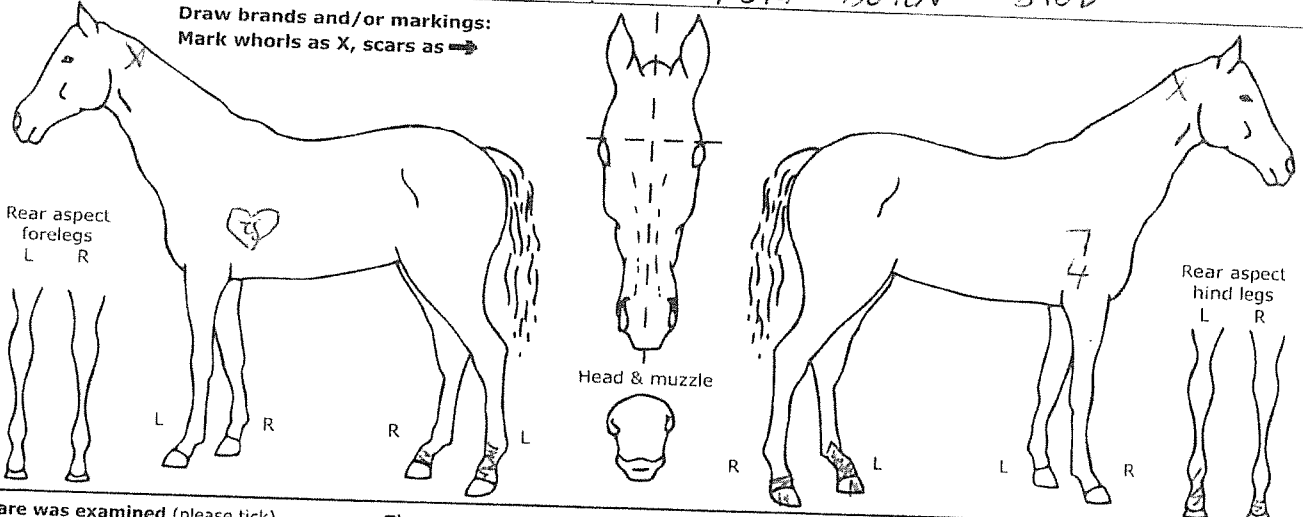
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



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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: MISS GAI		Age/DOB: 4y
(If unnamed) Sire:		Dam:
Breed: TB	Colour: CHESTNUT	Microchip No:
Owner (if known):		Address (if known):
Person requesting examination: TORRY BURN STUD		Place of examination: TORRY BURN STUD



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"/>	/
Not Sedated	<input type="checkbox"/>	Not Pregnant	<input checked="" type="checkbox"/>	
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: 35 x 41 mm	Left: CORPUS LUTEUM	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 58 x 40 mm	Right: 38 mm	

Uterus	Y	N	Details
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
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			

Vagina	Y	N	Details
Manual Examination per Vagina	<input type="checkbox"/>	<input checked="" type="checkbox"/>	maiden m/c
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination per Speculum	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Comments			

Cervix	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			

Vulva	Y	N	Details
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Comments			

Udder	
Visual Examination	N/A
Manual Examination	

Other comments

The mare was sedated only because she is a maiden and first time inside

Date: 12/04/12	Signed: Cecilia Cortina di Panna
Name (please print): CECILIA CORTINA di PANNA	Place stamp/write address here: NEWCASTLE EQUINE CENTRE OLD TOTE BUILDING BROADMEADOW RACECOURSE P.O. Box 123, Broadmeadow NSW 2292
Contact Number: 02 4927 6135	09749
AVA No:	VPB No: