

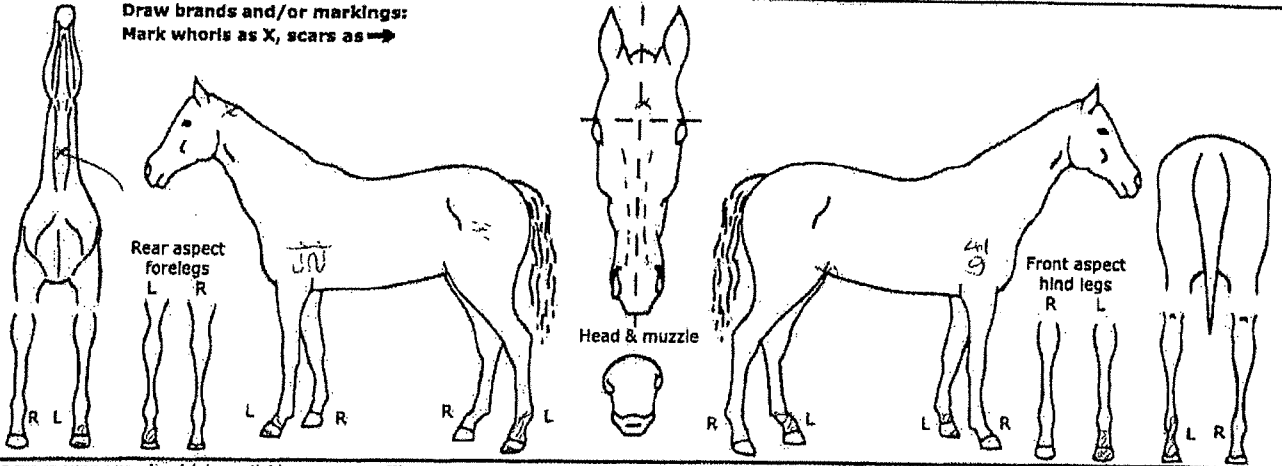
604



Equine Veterinarians Australia
A Special Interest Group of the Australian Veterinary Association Pty Ltd. ABN 63 008 522 852
VETERINARY REPORT ON BROODMARE FOR SALE



Animal presented as: <i>CORSA ROSA</i>		Age/DOB: <i>22.9.09</i>
(If unnamed) Sire:		Dam:
Breed:	Colour: <i>CHESTNUT</i>	Microchip No: <i>985100010954066</i>
Owner (if known):		Address (if known):
Person requesting examination:		Place of examination: <i>COOLMORE, NSW</i>



This mare was examined (please tick)		The mare was (please tick)	
Under Sedation	<input type="checkbox"/>	Pregnant	<input type="checkbox"/>
Not Sedated	<input checked="" 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	Largest Follicles Diameter	Comments
Manual examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Left 6.0	CL 2.5	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right 6.2	1.3	

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

Cervix	Y	N	Details
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Vagina	Y	N	Details
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

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

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

Other relevant clinical abnormalities:

Note: This examination is limited to an assessment of the above specified matters 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.

Date: <i>11.4.18</i>	Signed: <i>[Signature]</i>
Name (please print): <i>M. MACOMENT</i>	Place stamp/write address here:
Contact Number: <i>02 6576 4200</i>	
AVA No:	VPB No: <i>N8663</i>