

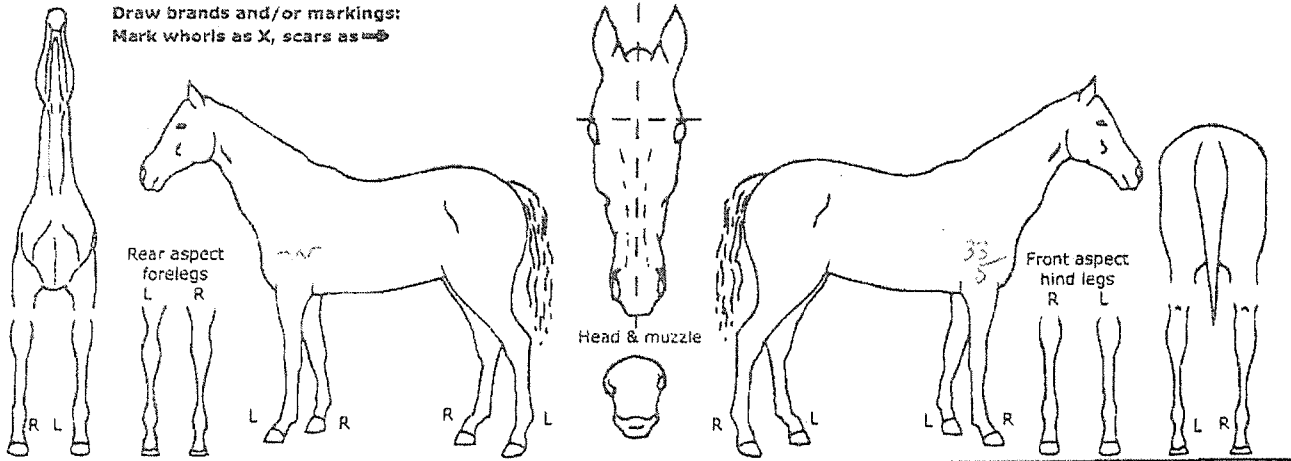


**VETERINARY REPORT ON BROODMARE FOR SALE**



827 ✓

Animal presented as: <b>Duchess Christina</b>		Age/DOB: <b>2015</b>
(If unnamed) Sire: <b>Zaustar</b>		Dam: <b>Jaggiatore</b>
Breed: <b>TB</b>	Colour: <b>Bay</b>	Microchip No: <b>985100012057274</b>
Owner (if known):		Address (if known):
Person requesting examination: <b>E Ealdon</b>		Place of examination: <b>Woodside Park</b>



This mare was examined (please tick)		The mare was (please tick)	
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	Largest Follicles Diameter	Comments
Manual examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Left 40mm x 30mm	Nil, CL present	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right 30mm x 30	10mm	

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 type="checkbox"/>	<input checked="" 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: <b>13/06/18</b>	Signed: <i>V Douglas</i>
Name (please print): <b>Dr Ian V Douglas BVSc MACVSc</b>	Place stamp/write address here:
Contact Number: <b>0400 288 240</b>	<b>Equine Consultants Australia Pty Ltd</b>
AVA No: <b>13984</b>	<b>P O Box 134, Macedon VIC 3440</b>
VPB No: <b>3744</b>	