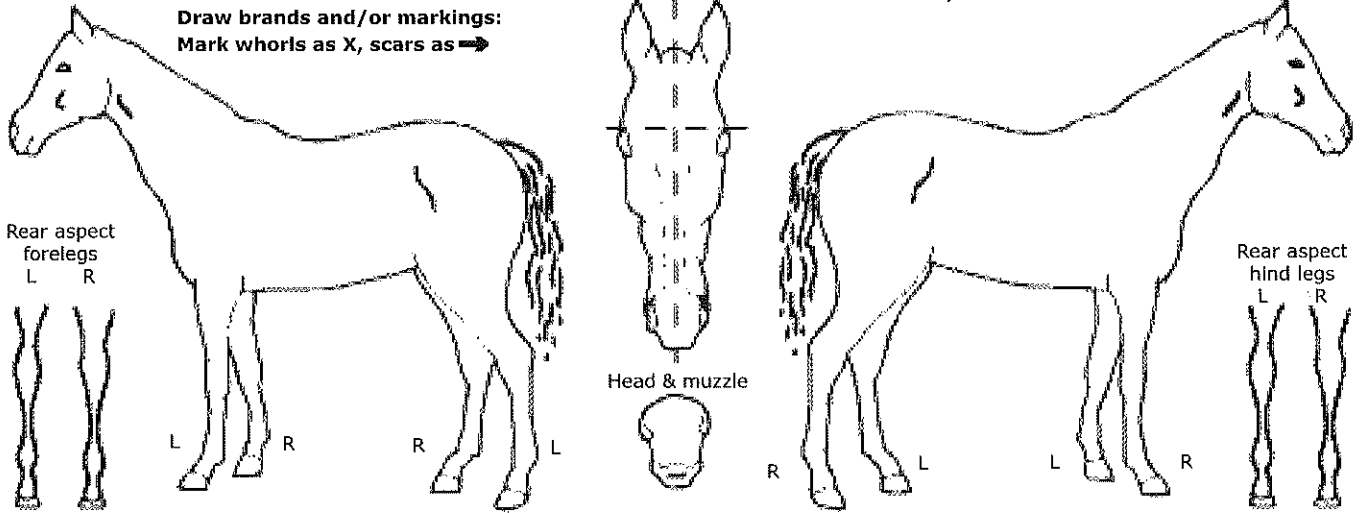


This examination is limited to an assessment of the reproductive matters below and should in no way be relied upon as a representation or expression of opinion as to breeding soundness. It is beyond the scope of this examination to definitively detect if this mare has been treated with Equity® Vaccine or any other medication.

Animal presented as: <u>MARJAM GARDISSE</u>		Age/DOB: <u>2010</u>
(If unnamed) Sire:		Dam:
Breed: <u>TB</u>	Colour: <u>BAY</u>	Microchip No: <u>985100010963323</u>
Owner (if known):		Address (if known):
Person requesting examination:		Place of examination: <u>WILDEN, VIC.</u>



This mare was examined (please tick)		The mare was (please tick)		Reported last serve date	Vaccination	Y/N	Date
Under Sedation	<input type="checkbox"/>	Pregnant	<input checked="" type="checkbox"/>	<u>17/09/20</u>	Hendra (HeV)	<u>N</u>	<u>-</u>
Not Sedated	<input checked="" type="checkbox"/>	Not Pregnant	<input type="checkbox"/>		Tetanus	<u>Y</u>	<u>7/7/20</u>
Other Physical Restraint	<u>CRUSH</u>				Strangles	<u>Y</u>	<u>7/7/20</u>
					EHV-1,4	<u>Y</u>	<u>21/4/21</u>

Ovaries		NL	Ab	NE		NL	Ab	NE	Total Ovarian Dimensions	Largest Follicle Diameter	Comments:
Manual Examination per Rectum	Left				Right						
U/S Examination	Left				Right						

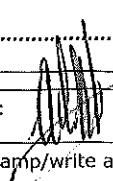
Uterus	NL	Ab	NE
Manual Examination per Rectum			
U/S Examination			
	Y	N	NE
Uterine Cysts?			
Uterine Fluid?			
Comments:			

Cervix	NL	Ab	NE
Manual Examination per Vagina			
U/S Examination			
Visual Examination per Speculum			
Comments:			
Vulva	Y	N	NE
Caslicked / repairs?	<input checked="" type="checkbox"/>		
Comments:			

Vagina	NL	Ab	NE
Manual Examination per Vagina			
U/S Examination			
Visual Examination per Speculum			
Comments:			

Udder	NL	Ab	NE
Visual Examination	<input checked="" type="checkbox"/>		
Manual Examination	<input checked="" type="checkbox"/>		
Comments:			

Other comments

Date: <u>28/06/21</u>	Signed: 
Name (please print):	Place stamp/write address here:
Contact Number:	
AVA No: <u>17597</u>	VPB No: <u>3602</u>

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