

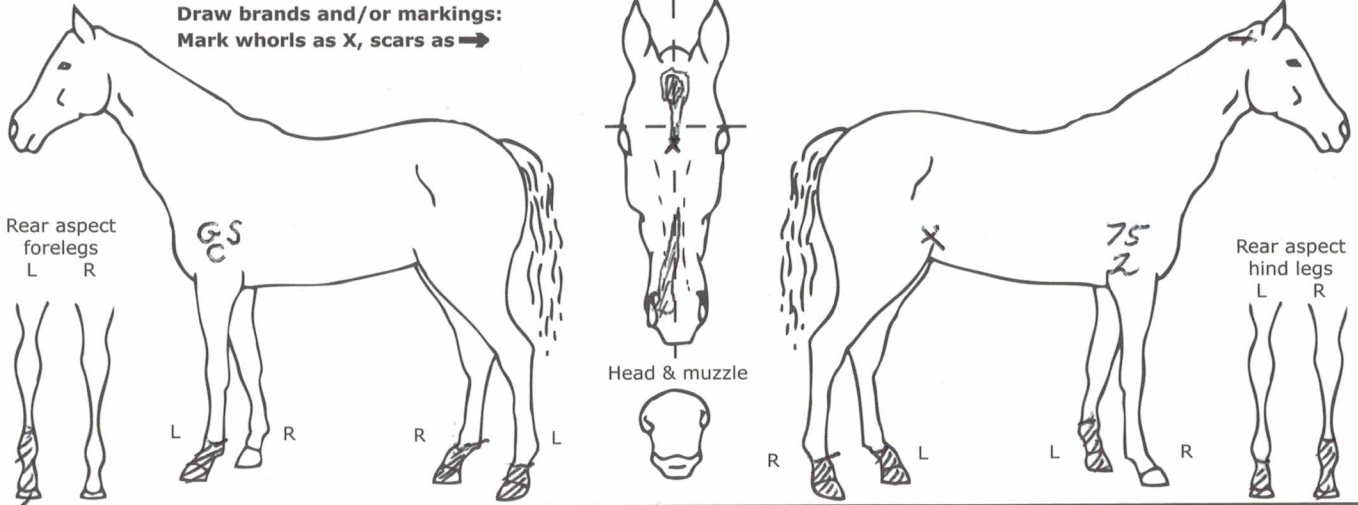


## VETERINARY REPORT ON BROODMARE FOR SALE

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: <b>SOUTH PEARL</b>		Age/DOB: <b>24-10-2012</b>
(If unnamed) Sire: <b>HIGH CHAPARRAL (IRE)</b>		Dam: <b>SOUTH SEA PEARL</b>
Breed: <b>THOROUGHBRED</b>	Colour: <b>BROWN</b>	Microchip No: <b>985100012023519</b>
Owner (if known): <b>BOWNESS STUD</b>		Address (if known):
Person requesting examination: <b>MR JOHN NORTH</b>		Place of examination: <b>BOWNESS STUD</b>

Draw brands and/or markings:  
Mark whorls as X, scars as →



This mare was examined (please tick)

Under Sedation	<input type="checkbox"/>
Not Sedated	<input checked="" type="checkbox"/>
Other Physical Restraint	<input type="checkbox"/>

The mare was (please tick)

Pregnant	<input checked="" type="checkbox"/>
Not Pregnant	<input type="checkbox"/>

Reported last serve date

**6-9-2020**

Vaccination Y/N Date

Hendra (HeV)	<input type="checkbox"/>	<input type="checkbox"/>	
Tetanus	<input type="checkbox"/>	<input type="checkbox"/>	
Strangles	<input type="checkbox"/>	<input type="checkbox"/>	
EHV-1,4	<input type="checkbox"/>	<input type="checkbox"/>	

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

Uterus	NL	Ab	NE
Manual Examination per Rectum			
U/S Examination			
	<b>Y</b>	<b>N</b>	<b>NE</b>
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"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manual Examination			
Comments:			

Other comments .....

Date: <b>25-6-2021</b>	Signed: <b>PJ Nott BVSc</b>
Name (please print): <b>PJ NOTT</b>	Place stamp/write address here:
Contact Number: <b>02 69422033</b>	<b>COOTAMUNDRA VETERINARY CLINIC</b> <b>63 MURRAY ST 23072</b> <b>COOTAMUNDRA NSW 2590</b> <b>PH: 02 6942 2033</b>
AVA No: <b>639</b>	
VPB No: <b>N1511</b>	