



# Equine Veterinarians Australia

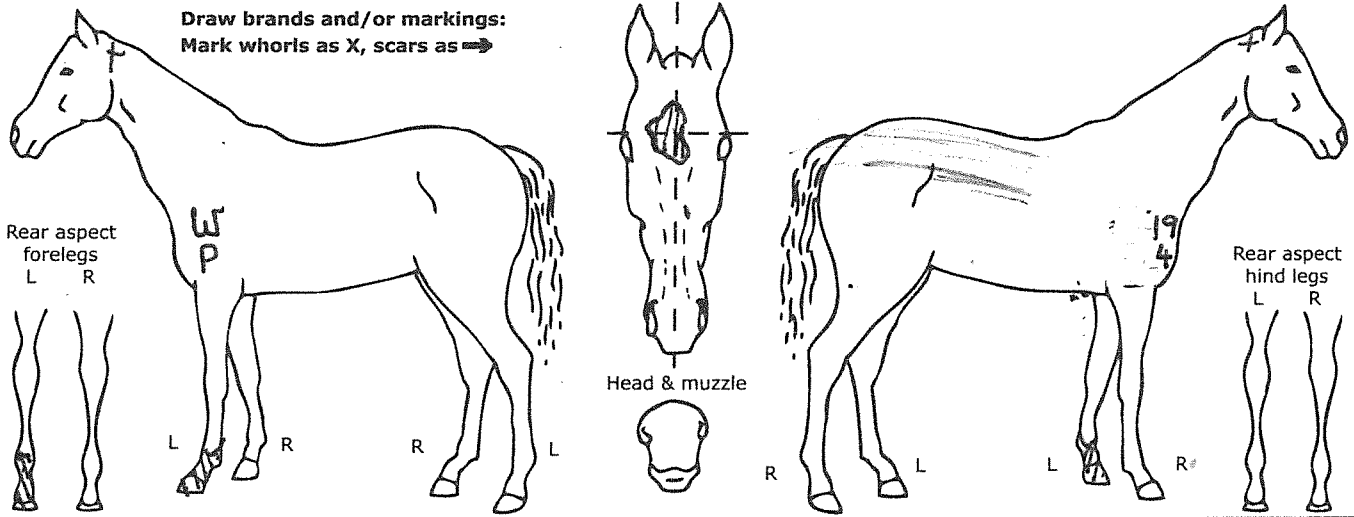
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



## 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 EquiVax<sup>®</sup> Vaccine or any other medication.

Animal presented as: <b>Greenmount Belle</b>		Age/DOB: <b>2004</b>
(If unnamed) Sire:		Dam:
Breed: <b>Tbd</b>	Colour: <b>Brestnut</b>	Microchip No: <b>985 100010778968</b>
Owner (if known): <b>Merricks Station</b>	Address (if known): <b>20 Merricks Beach Rd, Merricks</b>	
Person requesting examination: <b>Owner</b>	Place of examination: <b>As Above</b>	



<b>This mare was examined</b> (please tick)	<b>The mare was</b> (please tick)	<b>Reported last serve date</b>	<b>Vaccination</b>	<b>Y/N</b>	<b>Date</b>
Under Sedation <input type="checkbox"/>	Pregnant <input checked="" type="checkbox"/>	<b>26.10.2020</b>	Hendra (HeV)		
Not Sedated <input checked="" type="checkbox"/>	Not Pregnant <input type="checkbox"/>		Tetanus		
Other Physical Restraint <input type="checkbox"/>			Strangles		
			EHV-1,4		

Ovaries		NL	Ab	NE		NL	Ab	NE	Total Ovarian Dimensions	Largest Follicle Diameter	Comments:
Manual Examination per Rectum	Left				Right						
U/S Examination	Left	<input checked="" type="checkbox"/>			Right	<input checked="" type="checkbox"/>					

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

Cervix	NL	Ab	NE
Manual Examination per Vagina			
U/S Examination	<input checked="" type="checkbox"/>		
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	<input checked="" type="checkbox"/>		
Visual Examination per Speculum			
Comments:			

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

Other comments .....

Date: <b>29.6.21</b>	Signed:
Name (please print): <b>Kylie Tiller</b>	Place stamp/write address here:
Contact Number: <b>0438 309 415</b>	<b>Red Hill Equine</b>
AVA No: <b>2949</b>	<b>55 GIBB RD Red Hill 21569</b>
VPB No: <b>2611</b>	