



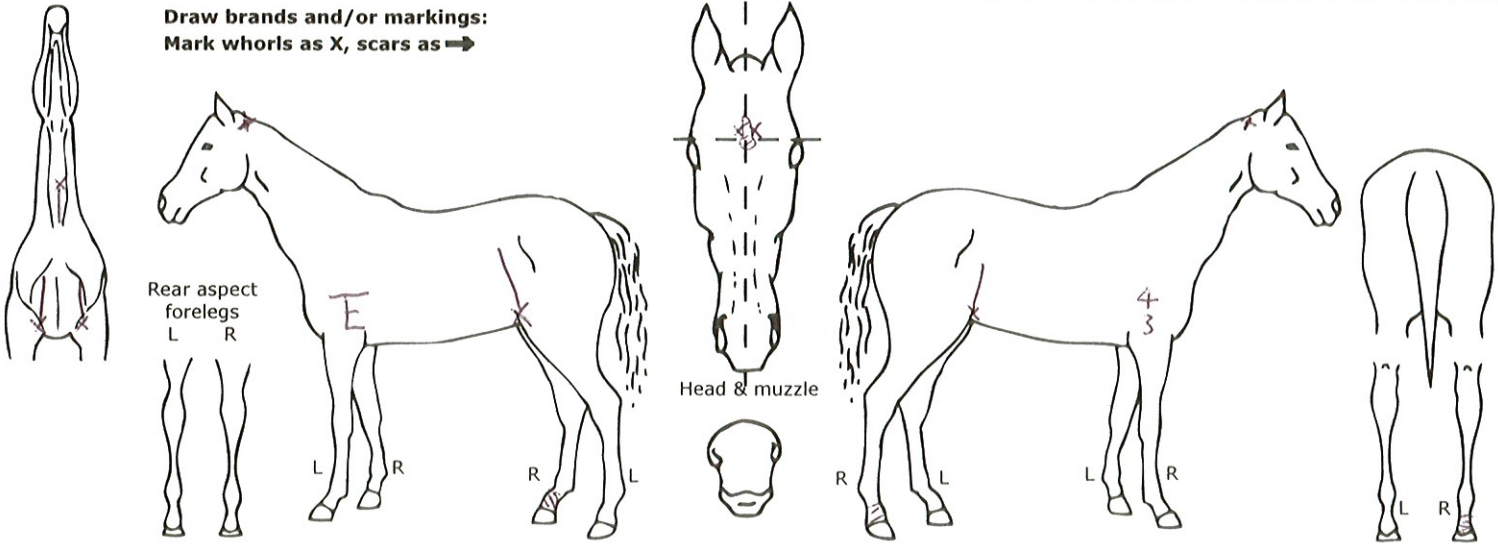
Equine Veterinarians Australia

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

CERTIFICATE OF EXAMINATION FOR PREGNANCY



Animal presented as: <u>DOMESDAY SCENARIO</u>	
(If unnamed) Sire:	Dam:
Breed: <u>TB</u>	Colour: <u>BROWN</u>
Microchip No: <u>985100012034196</u>	Age/DOB: <u>28/08/15</u>
Owner (if known):	Address (if known):
Person requesting examination: <u>INGLIS</u>	Place of examination: <u>ROSEMONT STUD</u>



THE EXAMINATION

Date	Rectal Examination	Ultrasonographic Examination	Positive	Negative	Was there evidence of twins?
<u>30/06/21</u>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>

Comments:

- Notes:**
- 1) It is not possible to detect multiple pregnancies in all cases.
 - 2) To obtain insurance for the pregnancy, these tests must be completed 45 days or more from the last date of service.

This is to certify that I performed the described tests on the mare listed above

Date: <u>30/06/21</u>	Signed: <u>Freya Rees-Jones</u>
Name (please print): <u>FREYA REES-JONES</u>	Place stamp/write address here: 37329
Contact Number: <u>0352206500</u>	FREYA REES-JONES ROSEMONT STUD 250 VOLUN ROAD GNARWARRE VIC 3221
AVA No: <u>90247</u> VPB No: <u>9617</u>	