



# Equine Veterinarians Australia

A Special Interest Group of the Australian Veterinary Association Ltd ABN 43 298 527 857

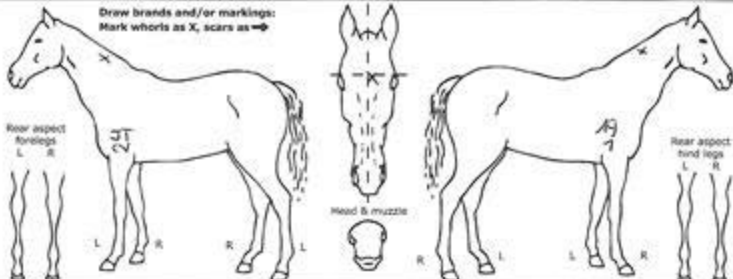


## VETERINARY REPORT ON BROODMARE FOR SALE

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 EquiVik Vaccine or any other medication.

Animal presented as: <b>SMOKING SHEISHA</b>	Age/DOB: <b>2001</b>
(If unnamed) Sire:	Dam:
Breed: <b>TB</b>	Colour: <b>BROWN</b>
Owner (if known): <b>WANE SLATTERY</b>	Microchip No: <b>NOT FOUND</b>
Person requesting examination: <b>OWNER</b>	Address (if known): <b>MOSS VALE</b>
	Place of examination: <b>BRIDDON PARK</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:	

The mare was (please tick)

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

Reported last serve date

(Please tick appropriate boxes - add additional sheets for details if required)

Ovaries	Y	N	Total Ovarian Dimensions (Measured by US)	Largest Follicle Diameter (Measured by US)	Comments		
Manual Examination per Rectum			Left:	Left:			
U/S Examination			Right:	Right:			
Uterus	Y	N	Details	Vagina	Y	N	Details
Manual Examination per Rectum	<input checked="" type="checkbox"/>			Manual Examination per Vagina		<input checked="" type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>		WNL	U/S Examination	<input checked="" type="checkbox"/>		
Uterine Cysts				Visual Examination per Speculum		<input checked="" type="checkbox"/>	
Uterine Fluid				Comments			
Comments							
Cervix	Y	N	Details	Vulva	Y	N	Details
Manual Examination per Vagina		<input checked="" type="checkbox"/>		Contracted		<input checked="" type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>		WNL	Comments			
Visual Examination per Speculum		<input checked="" type="checkbox"/>					
Comments							
				Udder			
				Visual Examination			WNL
				Manual Examination			WNL

Other comments

Date: **22/05/2017**

Name (please print): **Dr MARIA DIAZ**

Contact Number: **0413460282**

AVA No: **41459** VPS No: **10146**

Signed:

Place stamped by address: **SHEIK Pty Ltd**

**Southern Highlands Equine Centre**

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