



Equine Veterinarians Australia

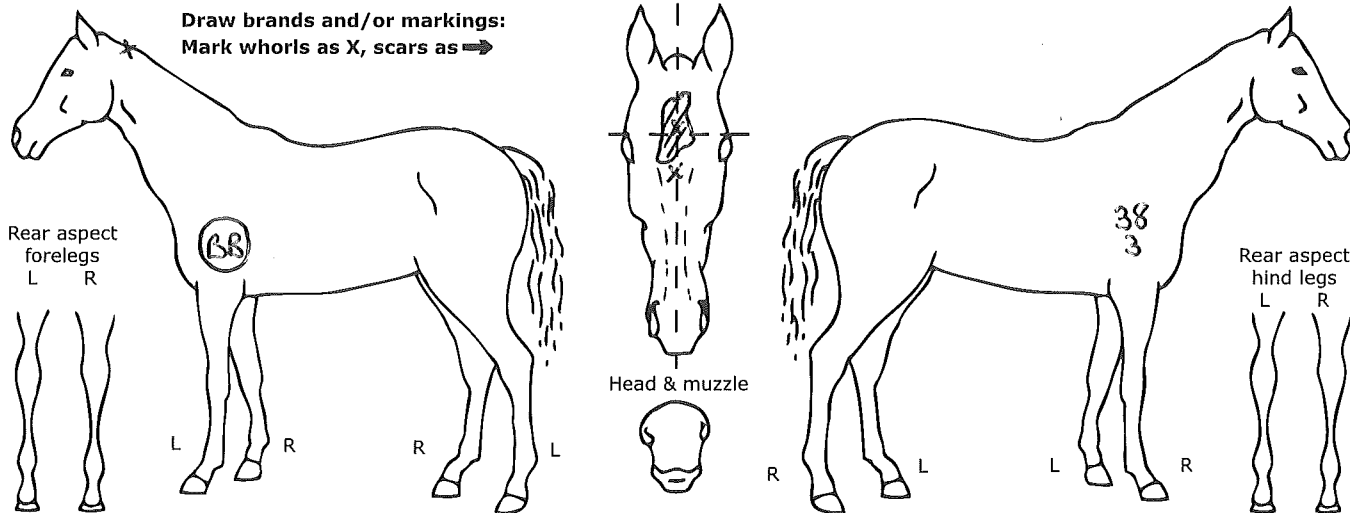
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



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 EquiV@ Vaccine or any other medication.

Animal presented as: VALISE		Age/DOB: 2013
(If unnamed) Sire: FOXWEDGE		Dam: START PACKING
Breed: TB	Colour: BAY	Microchip No: 985100012029991
Owner (if known): MYSTERY DOWNS		Address (if known):
Person requesting examination: L DUCKWORTH		Place of examination: FAIRVIEW PARK STUD



This mare was examined (please tick)

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

The mare was (please tick)

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

Reported last serve date

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(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	<input type="checkbox"/>	<input type="checkbox"/>	Left: 4.0cm x 4.8cm	Left: 2.4cm	
U/S Examination	<input type="checkbox"/>	<input type="checkbox"/>	Right: 5cm x 5.0cm	Right: 1.8cm	

Uterus	Y	N	Details
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Uterine Cysts	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Uterine Fluid	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Comments			NO SIGNIFICANT ABNORMALITY

Cervix	Y	N	Details
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Comments			NO SIGNIFICANT ABNORMALITY

Vagina	Y	N	Details
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Comments			NO SIGNIFICANT ABNORMALITY

Vulva	Y	N	Details
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Comments			NO SIGNIFICANT ABNORMALITY

Udder	
Visual Examination	<input checked="" type="checkbox"/>
Manual Examination	<input checked="" type="checkbox"/>

Other comments

Date: 12/6/2018
Name (please print): IAN A DUCKWORTH
Contact Number: 0245885200
AVA No: 796
VPB No: 3391

Signed:
Place stamp/write address here: Dr Ian Duckworth BVSc Agnes Banks Equine Clinic Pty Ltd 5 Price Lane - Agnes Banks NSW 2753 Phone: +61 2 4588 5200 Fax: +61 2 4578 1458