



Equine Veterinarians Australia

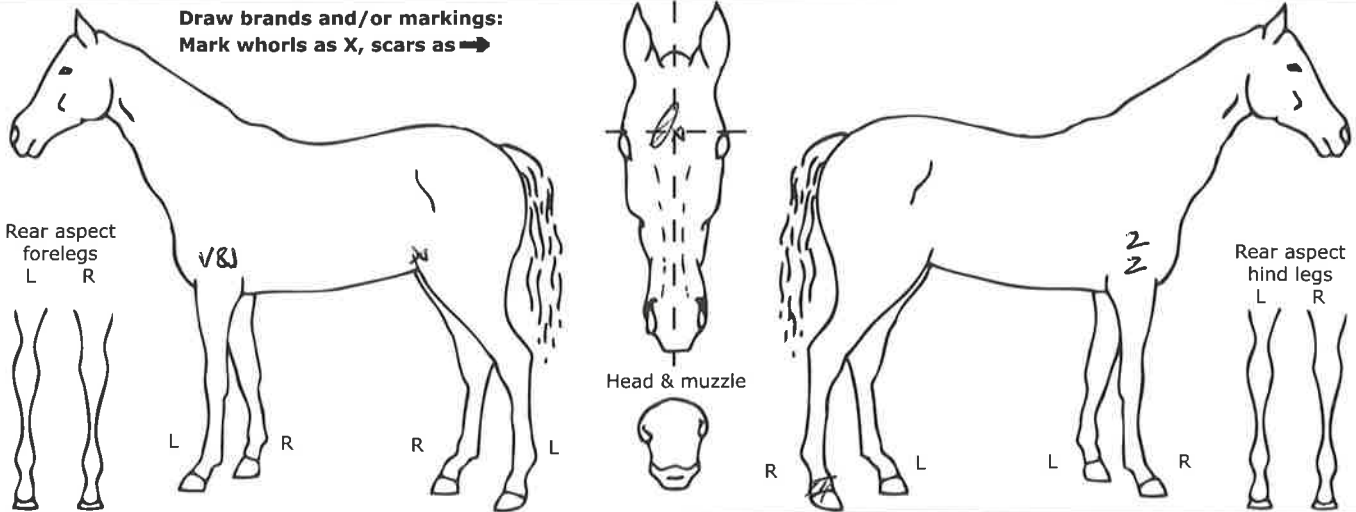
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



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® Vaccine or any other medication.

Animal presented as: WEST LOVE		Age/DOB: 2002
(If unnamed) Sire:		Dam:
Breed: TB	Colour: BAY	Microchip No: 981000300242711
Owner (if known):		Address (if known):
Person requesting examination:		Place of examination: ARROWFIELD STUD



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

Reported last serve date

NOT COVERED 2017

(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 checked="" type="checkbox"/>	<input type="checkbox"/>	Left: 4.4 x 5cm	Left: 20	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 4 x 5cm	Right: 20	CA visible
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 checked="" type="checkbox"/>	<input type="checkbox"/>	0.5cm @ horn 2x0.5cm body		
Uterine Fluid	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1cm + 2x0.5cm CCT		
Comments					
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 type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments			WNL		
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 type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments			WNL		
Vulva	Y	N	Details		
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments			WNL		
Udder	Details				
Visual Examination	WNL				
Manual Examination	WNL				

Other comments **WNL = WITHIN NORMAL LIMITS**

Date: 15/6/18	Signed:
Name (please print): SEAN FINAN	Place stamp/write address here:
Contact Number:	
AVA No:	VPB No: N10270

Signed:	11851
Place stamp/write address here:	
Gurdy Veterinary Services	
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