



Equine Veterinarians Australia

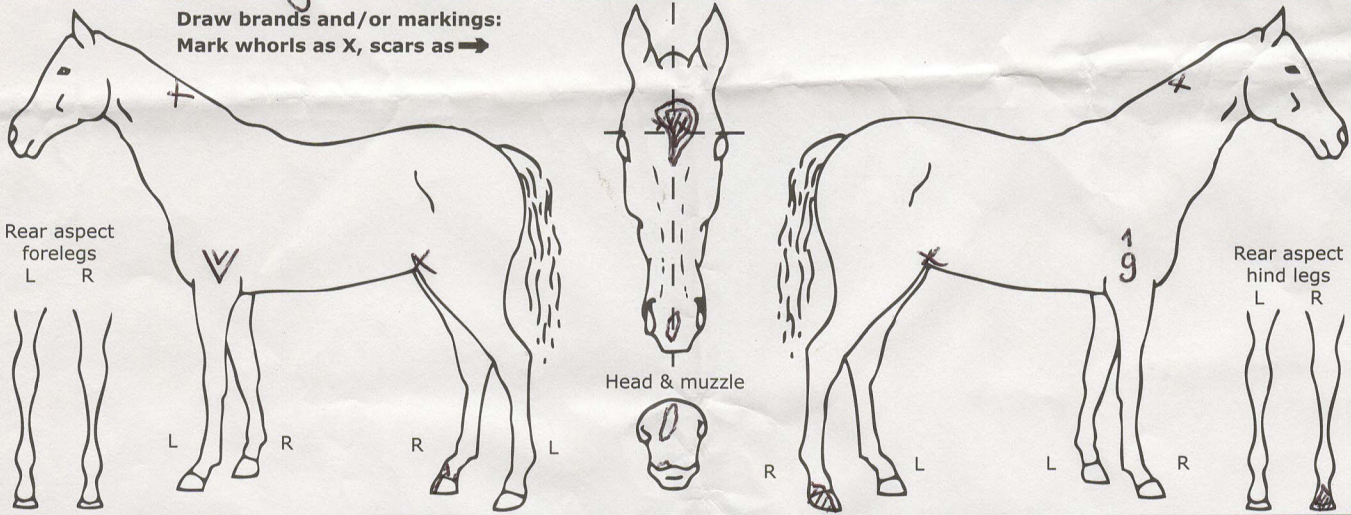
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



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 Equity® Vaccine or any other medication.

Animal presented as: She's got soul		Age/DOB: 2009
(If unnamed) Sire:		Dam:
Breed: TB	Colour: Brown	Microchip No: 985 100010958317
Owner (if known): Mandy Powell	Address (if known):	
Person requesting examination: Mandy Powell	Place of examination: Vision Park	



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

(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: 68mm	Left: 34mm	soft
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 30mm	Right: 14mm	+ CL
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"/>	Good tone		
Uterine Cysts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No cysts or fluid		
Uterine Fluid	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Good tone		
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 checked="" type="checkbox"/>	<input type="checkbox"/>			
Comments			Good, open 1 finger		
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			cervix good		
Vulva	Y	N	Details		
Caslicked	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Comments			1/3 length, good conformation		
Udder					
Visual Examination	Normal				
Manual Examination	Normal				

Other comments

Date: **28/9/2018**

Name (please print): **Fenella Barker**

Contact Number: **0417886416**

AVA No: **22054**

VPB No: **SA2829**

Signed:

Place stamp/write address here:

Dr Fenella Barker
 Horsemad SA Hills
 43 Old Mount Barker Road
 Echunga SA 5153
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