

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





This examination is lir breeding soundness.	nited to . It is b	an as	ssessn I the s	nent cope	of the r of this	eproc exan	luctive inatio	matte n to d	ers below efinitivel	y and sh y detect	ould in no if this m	o way l are ha	be relied u s been tre	pon as a rep ated with Ed	presentation or quity® Vaccine	expre or an	ssion of y other	opinion as medication	
Animal presented as: Sovereign Wealth.															Age/DOB:	6	. 1		
(If unnamed) Sir	re:					3					am:		,						
Breed: Thoroughbred Colour: Drown Microchip No: 9851000 12024/87																			
Owner (if known)	: la	Pa	rh				2.4		Add	lress (i	if known):			*1 # #				
Person requesting				:					Plac	ce of e	xamina 0 MA	tion:	rle		v , s	- 19		5.518	
Place of examination: Draw brands and/or markings: Mark whorls as X, scars as Rear aspect forelegs L R Head & muzzle This mare was examined (please tick) The mare was (please tick) Reported last serve date Vaccination Y/N Date																			
Under Sedation	inea (p	lease	tick)		Preg		vas (p	lease t	ICK)						and the last of th	T Y/I	<u> </u>	Date	
Not Sedated		-	Pregn	ant	-		1	5/10	118	5		lendra (HeV) etanus	+_/	- 16	1011				
Other Physical Restrai	int		Α.	cn		regin								-	trangles	17	1/	12/19	
- since in the sin					34									-	HV-1,4	+-	10	10/10	
Ovaries		NL	Ab	NE		NL	Ab	NE	Total ()varian l	Dimensio	na I.a	avant Fall	iala Biamata		_		==	
Manual Examination per Rectum	Left	✓	AU	142	Right	~	Ab	NE	Total	Jvai iaii i	Difficusio	IIS Le	argest rolli	cle Diamete	r Comments	ş: 			
U/S Examination	Left				Right									¥1					
Uterus	NL	A	b	NE		6	ervix			NL	Ab	NE		Vagina		NL	Ab	NE	
Manual Examination per Rectum	/						4anua		ination Vagina	/				Manual Ex	camination per Vagina			/	
U/S Examination	/						U/S	Exam	ination		v				ramination			/	
	Υ	ı	N ·	NE					ination eculum			- " 2		CONTRACTOR STATE OF THE STATE OF	amination Speculum				
Uterine Cysts?		✓				C	omme	nts:						Comments:					
Uterine Fluid?						V	ulva			Y N NE				<i>Udder</i> N			NL Ab NE		
Comments: Caslicked / n														Visual Ex	amination	/			
Comments:														Manual Ex	amination			~	
										_	Comments	:							
Other comments																			
Date: /2/12	110								T	Signed	: .	28	121	,					
Name (please print		W.1	ie	1	27	4		2		Place stamp/write address here:									
Contact Number:			25		olat	1				Barwon Equine Hospital 8-12 Cooney St. Moolap 3221									
AVA No:											Ph:03 52488899/F 03 5248918 ABN: 65078993790								
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