



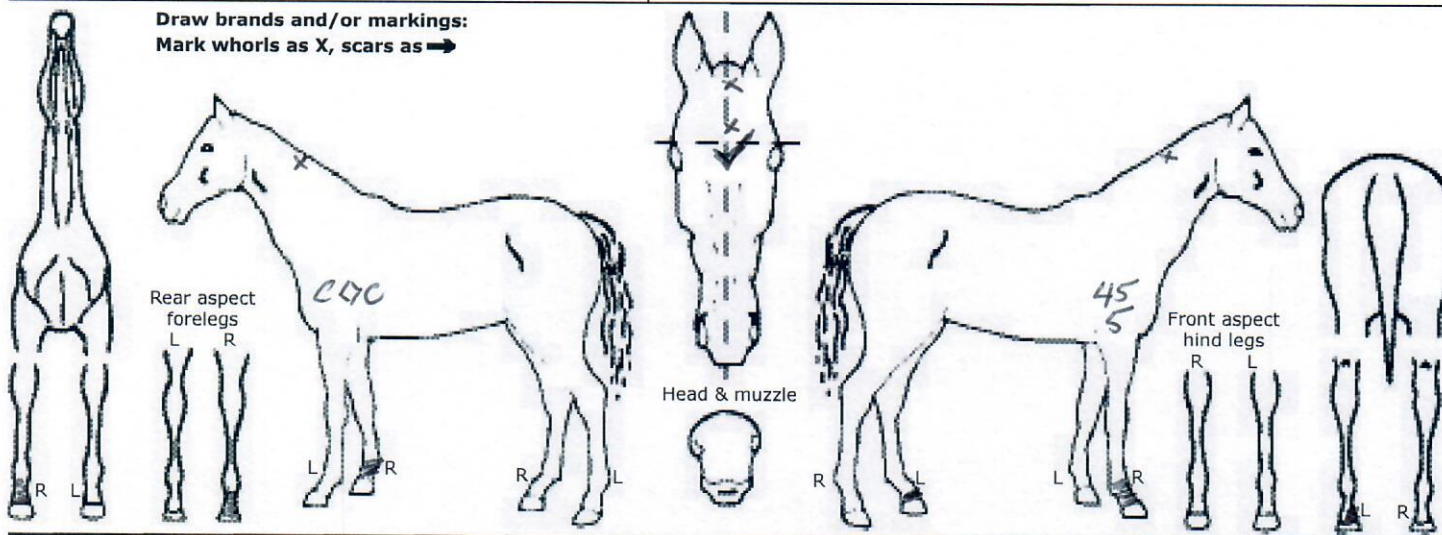
# Equine Veterinarians Australia

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

## VETERINARY REPORT ON BROODMARE FOR SALE



Animal presented as: <b>AH LA BOOM.</b>		Age/DOB: <b>3</b>
(If unnamed) Sire:		Dam:
Breed: <b>TB</b>	Colour: <b>BAY</b>	Microchip No: <b>9851000 12100 725</b>
Owner (if known): <b>EUREKA</b>		Address (if known):
Person requesting examination: <b>S M ALPINE</b>		Place of examination: <b>EUREKA STUD</b>



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"/>

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

Ovaries	Y	N	Total Ovarian Dimensions	Largest Follicles Diameter	Comments
Manual examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Left <b>40x40</b>	<b>2 x 18mm</b>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right <b>20x20</b>	<b>1 x 15mm.</b>	

Uterus	Y	N	Details
Manual Examination	<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"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Cervix	Y	N	Details
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Vagina	Y	N	Details
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
U/S examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Vulva	Y	N	Details
Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Udder	Y	N	Details
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Abnormalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

**Note:** This examination is limited to an assessment of the above specified matters 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 EquiVet Vaccine or any other medication.

Date: <b>24/7/19</b>	Signed: <b>DR PASCOE</b>
Name (please print): <b>DR PASCOE</b>	Place stamp/write address here:
Contact Number: <b>0418790 792</b>	<b>ORKEY VET HOSPITAL</b>
AVA No:	<b>P.O Box 2</b>
VPB No: <b>1296</b>	<b>ORKEY Q 4401</b>