



Equine Veterinarians Australia

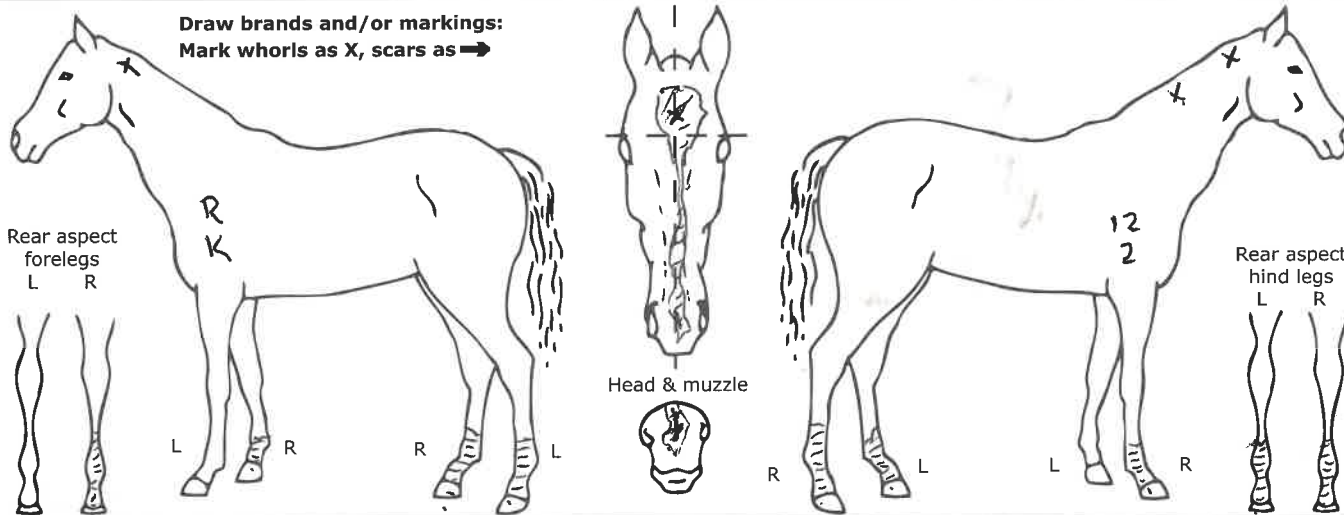
A Special Interest Group of the Australian Veterinary Association Ltd. ABN 63 008 522 852



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: JAMAICAN RAIN		Age/DOB: 19/9/2012
(If unnamed) Sire:		Dam:
Breed: TJB	Colour: Bn	Microchip No:
Owner (if known):		Address (if known):
Person requesting examination: IC. PENN		Place of examination: SWETTENHAM STUD



This mare was examined (please tick)

The mare was (please tick)

Reported last serve date

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

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 (Measured by US)	Largest Follicle Diameter* (Measured by US)	Comments
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Left: 4.5 x 2.5 cm	Left: 5mm	} suboptimal smaller than size
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: 4.5 x 2.7 cm	Right: 7mm	
Uterus	Y	N	Details		
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	} commonly normal suboptimal		
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					
Cervix	Y	N	Details		
Manual Examination per Vagina	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Visual Examination per Speculum	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments					
Vagina	Y	N	Details		
Manual Examination per Vagina	<input type="checkbox"/>	<input checked="" type="checkbox"/>	} MINIMAL TO NO NORMAL FOLLICULAR ACTIVITY suboptimal		
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Visual Examination per Speculum	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Comments					
Vulva	Y	N	Details		
Caslicked	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
Comments			GOOD CONFORMATION		
Udder					
Visual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NORMAL MAJORS		
Manual Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Other comments

Date: **22/9/2020**

Name (please print): **Dr J Hurley, Nagambie**

Contact Number:

AVA No: **2467**

VPB No:

Signed:

Place stamp/write address here: **J.R. HURLEY DVM**
SWETTENHAM STUD
P O BOX 210
NAGAMBIE, Vic 3608