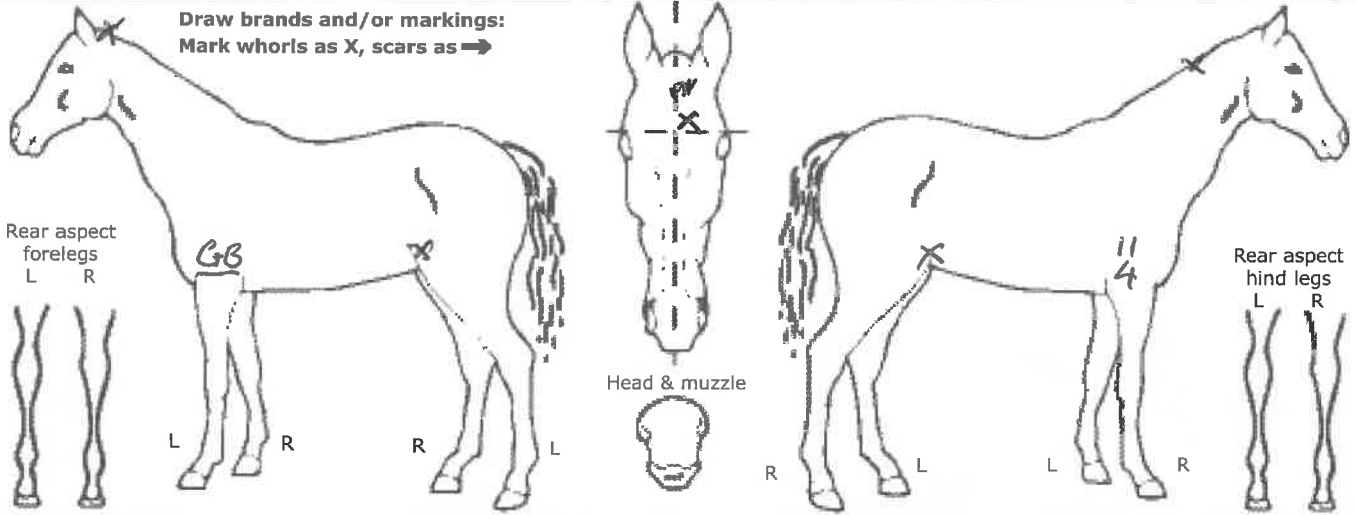


**VETERINARY REPORT ON BROODMARE FOR SALE**

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: <b>GLOBAL SANCTION</b>		Age/DOB: <b>19-09-2014</b>
(If unnamed) Sire: <b>SEBRING</b>		Dam: <b>GLOBAL BANANCE</b>
Breed: <b>T/BROOD</b>	Colour: <b>BAY</b>	Microchip No: <b>985100012051836</b>
Owner (if known): <b>A. WILKINSON</b>		Address (if known): <b>WERRIBAXE</b>
Person requesting examination: <b>D. WHITE</b>		Place of examination: <b>VINERY STUD</b>



**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**

Vaccination	Y/N	Date
Hendra (HeV)	Y	9-6-21
Tetanus	Y	18-5-21
Strangles	Y	18-5-21
EHV-1,4	Y	18-5-21

Ovaries		NL	Ab	NE		NL	Ab	NE	Total Ovarian Dimensions	Largest Follicle Diameter	Comments:
Manual Examination per Rectum	Left	<input checked="" type="checkbox"/>			Right	<input checked="" type="checkbox"/>			<b>LEFT: 5.2 x 3.8cm</b>	<b>22mm</b>	
U/S Examination	Left	<input checked="" type="checkbox"/>			Right	<input checked="" type="checkbox"/>			<b>RIGHT: 6.9 x 5.0cm</b>	<b>46mm</b>	

Uterus	NL	Ab	NE
Manual Examination per Rectum	<input checked="" type="checkbox"/>		
U/S Examination	<input checked="" type="checkbox"/>		
	Y	N	NE
Uterine Cysts?		<input checked="" type="checkbox"/>	
Uterine Fluid?		<input checked="" type="checkbox"/>	
Comments: <b>3<sup>+</sup> OEDEMA</b>			

Cervix	NL	Ab	NE
Manual Examination per Vagina	<input checked="" type="checkbox"/>		
U/S Examination	<input checked="" type="checkbox"/>		
Visual Examination per Speculum	<input checked="" type="checkbox"/>		
Comments: <b>RELAXED</b>			
Vulva	Y	N	NE
Caslicked / repairs?	<input checked="" type="checkbox"/>		
Comments:			

Vagina	NL	Ab	NE
Manual Examination per Vagina	<input checked="" type="checkbox"/>		
U/S Examination	<input checked="" type="checkbox"/>		
Visual Examination per Speculum	<input checked="" type="checkbox"/>		
Comments:			
Udder	NL	Ab	NE
Visual Examination	<input checked="" type="checkbox"/>		
Manual Examination			<input checked="" type="checkbox"/>
Comments:			


**Other comments** .....

Date: **10<sup>TH</sup> SEPTEMBER 2021**

Name (please print): **W.D. MATTHEWS**

Contact Number: **048876766**

AVA No: **5012** VPB No: **N8421**

Signed: 

Place stamp/write address here:

**W.D. Matthews**  
**Stone Lodge Equine Services Pty Ltd**  
**PO Box 436 Scone NSW 2337**