



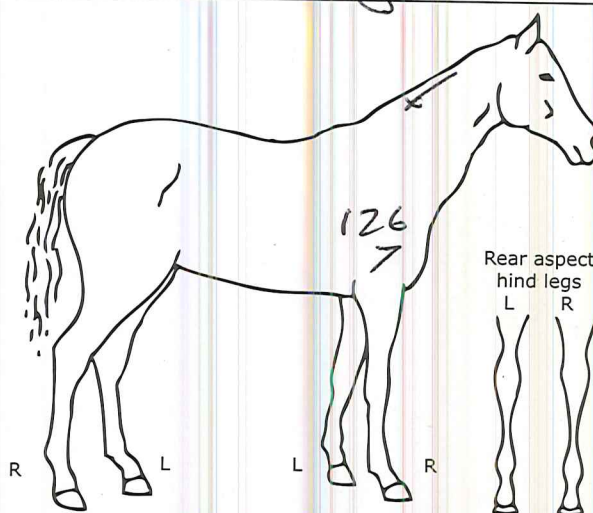
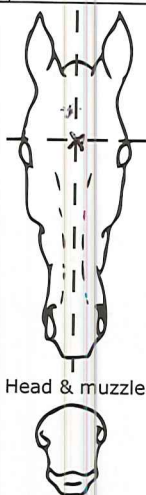
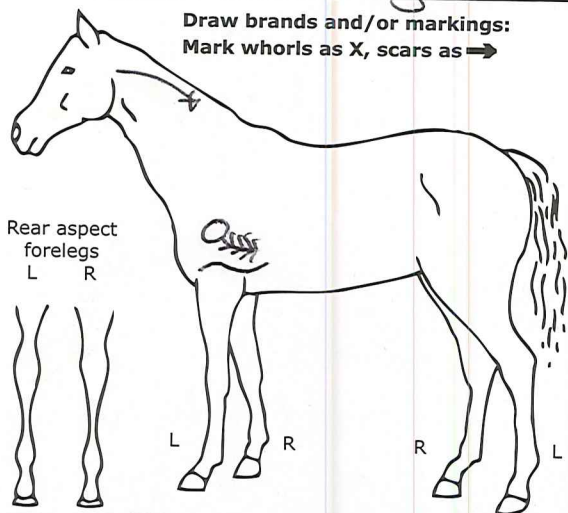
# Equine Veterinarians Australia

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



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>Zelectra</b>		Age/DOB: <b>4.10.17</b>
(If unnamed) Sire: <b>Shocking</b>		Dam: <b>Zadancer.</b>
Breed: <b>TBD</b>	Colour: <b>Bay</b>	Microchip No: <b>985100012125757</b>
Owner (if known):		Address (if known):
Person requesting examination: <b>Toby liston.</b>		Place of examination: <b>Three Bridges TBD.</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

(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: <b>45mm approx</b>	Left: <b>MSF</b>				
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Right: <b>40mm approx</b>	Right: <b>MSF</b>				
Uterus	Y	N	Details	Vagina	Y	N	Details	
Manual Examination per Rectum	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
U/S 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"/>		Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Thin hymen remnant in midline.</b>	
Uterine Fluid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Comments	<input type="checkbox"/>	<input type="checkbox"/>		
Comments			<b>NAD</b>	<th>Vulva</th> <th>Y</th> <th>N</th> <th>Details</th>	Vulva	Y	N	Details
				Caslicked	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
				Comments	<input type="checkbox"/>	<input type="checkbox"/>		
Cervix	Y	N	Details	Udder				
Manual Examination per Vagina	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Visual Examination	<b>NAD</b>			
U/S Examination	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Manual Examination	<b>NAD</b>			
Visual Examination per Speculum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Open Cervix</b>					
Comments								

Other comments

Date: **9.3.22**

Name (please print): **Andrew Cast**

Contact Number: **0408300 816**

AVA No: **9861**

VPB No: **6101**

Signed: **AKW**

Place stamp/wordmark here: **BALLARAT VETERINARY PRACTICE**

**EQUINE CLINIC**

**MIDAS ROAD, MINERS REST**

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**073590**