

Equine Veterinarians Australia A Special Interest Group of the Australian Veterinary Association Pty Ltd. ABN 63 008 522 852 CERTIFICATE OF EXAMINATION FOR PREGNANCY





					C. C
Animal presented as: SHANI DAN					
(If unnamed) Sire:	Dam:				
Breed: 733		Colour: CHOSTIVUT			
Microchip No: None octavo			Age,	/DOB: 200	2
MINERY POINCE STUD		ress (if known): 360'BEIGN	20 Chacte	GAL	P 6083
Person requesting examination: B.H.MLL.		Place of examination: YARRAGACE SNO			
Draw brands and/or markings: Mark whorls as X, scars as Rear aspect forelegs L R L R Rear R Rear R Rear R Rear R R R R R	Head	R muzzle	152	R	DE R
	THE	XAMINATION			
Date Rectal Examination Ultrasonogra	phic Examinatio	n Positive	Negative W	as there evide	nce of twins?
31.10.16		V		Yes	(No)
16.11.16		V		Yes	(No)
30.11.16	/			Yes	No
18-5-17		V		Yes	No
Comments:					
Notes: 1) It is not possible to detect multiple pregnancie 2) To obtain insurance for the pregnancy, these t This is to certify that I performed the descri	ests must be o			it date of serv	ice.
Date: (8-5-17.		Signed:	dolft		
Name (please print): Or RACHEL STONE		Place stamp/write a	ddress here:	11 1 2 2	14329
Contact Number: 0424940173 AVA No: 9075 VPB No: V1389		Professional Equine Services Pty Ltd PO Box 666 Mundaring, WA 6073 Dr Rachel Stone 0424940178			
40.40	2				